

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF OHIO  
EASTERN DIVISION

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IN RE: NATIONAL PRESCRIPTION MDL No. 2804  
OPIATE LITIGATION Case No. 17-md-2804

This document relates to: Judge Dan  
Aaron Polster

The County of Cuyahoga v. Purdue  
Pharma, L.P., et al.  
Case No. 17-OP-45005  
City of Cleveland, Ohio vs. Purdue  
Pharma, L.P., et al.  
Case No. 18-OP-45132  
The County of Summit, Ohio,  
et al. v. Purdue Pharma, L.P.,  
et al.  
Case No. 18-OP-45090

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Deposition of Matthew Baeppler  
Cleveland, Ohio  
January 17, 2019  
9:05 a.m.

Reported by: Bonnie L. Russo  
Job No. 3191692

<p style="text-align: right;">Page 2</p> <p>1 Deposition of Matthew Baeppler held at:</p> <p>2</p> <p>3</p> <p>4</p> <p>5 Zashin &amp; Rich Co. LPA</p> <p>6 950 Main Avenue</p> <p>7 4th Floor</p> <p>8 Cleveland, Ohio</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19 Pursuant to Notice, when were present on behalf</p> <p>20 of the respective parties:</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 4</p> <p>1 APPEARANCES (CONTINUED):</p> <p>2</p> <p>3 On behalf of McKesson Corporation:</p> <p>4 NEIL K. ROMAN, ESQ.</p> <p>5 COVINGTON &amp; BURLING, LLP</p> <p>6 The New York Times Building</p> <p>7 620 Eighth Avenue</p> <p>8 New York, New York 10018</p> <p>9 212-841-1221</p> <p>10 nroman@cov.com</p> <p>11 -and-</p> <p>12 ASEEM P. PADUKONE, ESQ.</p> <p>13 COVINGTON &amp; BURLING, LLP</p> <p>14 One Front Street</p> <p>15 San Francisco, California 94111</p> <p>16 415-591-7059</p> <p>17 apadukone@cov.com</p> <p>18</p> <p>19 Also Present:</p> <p>20 Wesley Kretch, City of Cleveland, Assistant</p> <p>21 Director of Law</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>
<p style="text-align: right;">Page 3</p> <p>1 APPEARANCES:</p> <p>2 On behalf of the City of Cleveland:</p> <p>3 DIANDRA S DEBROSSE ZIMMERMANN, ESQ</p> <p>4 ZARZAUR MUJUMDAR &amp; DEBROSSE</p> <p>5 2332 2nd Avenue, North</p> <p>6 Birmingham, Alabama 35203</p> <p>7 205-983-7985</p> <p>8 fuli@zarzaur.com</p> <p>9</p> <p>10 On behalf of Walmart, Inc</p> <p>11 CHRISTOPHER M MCLAUGHLIN, ESQ</p> <p>12 JONES DAY</p> <p>13 North Point</p> <p>14 901 Lakeside Avenue</p> <p>15 Cleveland, Ohio 44114</p> <p>16 216-586-3939</p> <p>17 cmmclaughlin@jonesday.com</p> <p>18</p> <p>19 On behalf of Endo Pharmaceuticals, Inc , Endo</p> <p>20 Health Solutions, Inc , Par Pharmaceuticals,</p> <p>21 Inc and Par Pharmaceutical Companies, Inc :</p> <p>22 GREGORY SCHINNER, ESQ</p> <p>23 (Via Teleconference)</p> <p>24 ARNOLD &amp; PORTER</p> <p>25 601 Massachusetts Avenue, N W</p> <p>Washington, D C 20001</p> <p>202-942-5000</p> <p>gregory.schinner@arnoldporter.com</p> <p>On behalf of Teva Pharmaceutical Industries:</p> <p>MORGAN LEWIS &amp; BOCKIUS, LLP</p> <p>MAUREEN BARBER, ESQ</p> <p>One Oxford Centre</p> <p>Thirty Second Floor</p> <p>Pittsburgh, Pennsylvania 15219</p> <p>412-560-7463</p>	<p style="text-align: right;">Page 5</p> <p>1 C O N T E N T S</p> <p>2 EXAMINATION OF MATTHEW BAEPLER PAGE</p> <p>3 BY MR. ROMAN 8</p> <p>4 BY MR. PADUKONE 152</p> <p>5 BY MR. McLAUGHLIN 213</p> <p>6 BY MS. BARBER 219</p> <p>7</p> <p>8</p> <p>9 EXHIBITS</p> <p>10 Exhibit 1 E-Mail Chain 36</p> <p>11 dated 2-27-18</p> <p>12 CLEVE_000180822-827</p> <p>13 Exhibit 2 E-Mail Chain 41</p> <p>14 dated 5-24-18</p> <p>15 CLEVE_001477213-7218</p> <p>16 Exhibit 3 E-Mail Chain 79</p> <p>17 dated 6-22-17</p> <p>18 CLEVE_000189730</p> <p>19 Exhibit 4 E-Mail Chain 85</p> <p>20 dated 5-25-18</p> <p>21 CLEVE_000179751</p> <p>22 Exhibit 5 Medical Examiner's 93</p> <p>23 Office</p> <p>24 Heroin/Fentanyl/Cocaine</p> <p>25 Related Deaths in</p> <p>Cuyahoga County</p> <p>2017 January Update</p> <p>2-8-18</p> <p>CLEVE_002231597-1607</p> <p>Exhibit 6 E-Mail dated 4-30-18 99</p> <p>CLEVE_000267011</p> <p>Exhibit 7 E-Mail Chain 101</p> <p>dated 2-26-18</p> <p>CLEVE_000267678</p>

<p>Page 6</p> <p>1 EXHIBITS (CONTINUED):</p> <p>2</p> <p>3 Exhibit 8 E-Mail dated 3-27-18 107</p> <p>4 CLEVE_001477582</p> <p>5 Exhibit 9 E-Mail Chain 111</p> <p>6 dated 3-20-18</p> <p>7 CLEVE_002257384-385</p> <p>8 Exhibit 10 Narcotics Realignment 116</p> <p>9 11-25-12</p> <p>10 CLEVE_000011161-1163</p> <p>11 Exhibit 11 Non-Fatal and Fatal Opioid 119</p> <p>12 Overdoses</p> <p>13 CLEVE_000251552</p> <p>14 Exhibit 12 Heroin Invests 130</p> <p>15 Fataals</p> <p>16 January 2017</p> <p>17 CLEVE_001476069-6080</p> <p>18</p> <p>19 Exhibit 13 Heroin Invests 132</p> <p>20 Fataals</p> <p>21 January 2018</p> <p>22 CLEVE_001476081-6092</p> <p>23 Exhibit 14 E-Mail dated 1-5-18 134</p> <p>24 CLEVE_000182046</p> <p>25</p> <p>26 Exhibit 15 Letter dated 3-6-18 137</p> <p>27 CLEVE_000247906</p> <p>28 Exhibit 16 Cleveland Division of 146</p> <p>29 Police Anticipated Travel</p> <p>30 Expense Report</p> <p>31 CLEVE_002366453-6461</p> <p>32</p> <p>33 Exhibit 17 E-Mail Chain 149</p> <p>34 dated 5-10-18</p> <p>35 Attachment</p> <p>36 CLEVE_000366813-875</p> <p>37 Exhibit 18 E-Mail Chain 160</p> <p>38 dated 4-19-18</p> <p>39 CLEVE_000267663</p> <p>40</p>	<p>Page 8</p> <p>1 PROCEEDINGS</p> <p>2</p> <p>3 MATTHEW BAEPLER,</p> <p>4 was called for examination by counsel and,</p> <p>5 after having been duly sworn by the Notary, was</p> <p>6 examined and testified as follows:</p> <p>7 EXAMINATION BY COUNSEL FOR DEFENDANT</p> <p>8 McKESSON CORPORATION</p> <p>9 BY MR. ROMAN:</p> <p>10 Q. Good morning, Sergeant Baeppler.</p> <p>11 How are you?</p> <p>12 A. Very well.</p> <p>13 Q. Sergeant, before we begin, I'd just</p> <p>14 like to put a statement on the record here, and</p> <p>15 then we will begin with your deposition.</p> <p>16 Yesterday we received a production</p> <p>17 of more than 27,000 pages of documents from</p> <p>18 your custodial file. Obviously we have not had</p> <p>19 an opportunity to review all those documents.</p> <p>20 Therefore, although we're going to proceed with</p> <p>21 this deposition today, we reserve the right to</p> <p>22 continue the deposition so that we can examine</p> <p>23 you on the newly and belatedly produced</p> <p>24 documents.</p> <p>25 So do you understand that we're</p>
<p>Page 7</p> <p>1 EXHIBITS (CONTINUED):</p> <p>2</p> <p>3 Exhibit 19 5th District Vice Unit 166</p> <p>4 District Support</p> <p>5 Monthly Statistics</p> <p>6 November 2013</p> <p>7 CLEVE_002371733</p> <p>8</p> <p>9 Exhibit 20 E-Mail Chain 179</p> <p>10 dated 2-7-18</p> <p>11 CLEVE_000267609</p> <p>12</p> <p>13 Exhibit 21 E-Mail Chain 183</p> <p>14 dated 3-8-18</p> <p>15 CLEVE_000267423</p> <p>16</p> <p>17 Exhibit 22 E-Mail Chain 190</p> <p>18 dated 3-28-18</p> <p>19 CLEVE_000267124</p> <p>20</p> <p>21 Exhibit 23 E-Mail Chain 194</p> <p>22 dated 3-29-18</p> <p>23 Attachment</p> <p>24 CLEVE_002231621</p> <p>25 Exhibit 24 E-Mail dated 3-7-18 198</p> <p>26 CLEVE_000267426-429</p> <p>27</p> <p>28 Exhibit 25 Event Summary 205</p> <p>29 CLEVE_000251274-283</p> <p>30 Exhibit 26 Cleveland Police 211</p> <p>31 Narcotics Unit</p> <p>32 Compliance Case Tracker</p> <p>33 CLEVE_000345261-268</p> <p>34</p> <p>35 (Exhibits included with transcript )</p>	<p>Page 9</p> <p>1 going to have to -- you may likely have to come</p> <p>2 back here?</p> <p>3 A. I don't have any control over that.</p> <p>4 Q. I understand.</p> <p>5 So, Sergeant, my name is Neil Roman.</p> <p>6 I'm with the law firm of Covington &amp; Burling.</p> <p>7 We represent McKesson and the other two lawyers</p> <p>8 or -- three lawyers, who will introduce</p> <p>9 themselves.</p> <p>10 MR. PADUKONE: Aseem Padukone from</p> <p>11 Covington &amp; Burling on behalf of McKesson.</p> <p>12 MS. BARBER: Maureen Barber on</p> <p>13 behalf of the Teva defendants. I'm with the</p> <p>14 firm Morgan Lewis &amp; Bockius.</p> <p>15 MR. McLAUGHLIN: Chris McLaughlin</p> <p>16 from Jones Day in Cleveland on behalf of</p> <p>17 Wal-Mart.</p> <p>18 BY MR. ROMAN:</p> <p>19 Q. Could you please state your name for</p> <p>20 the record.</p> <p>21 A. My name is Matthew Baeppler.</p> <p>22 MS. DEBROSSE: One moment. We've</p> <p>23 got counsel on the phone.</p> <p>24 MR. ROMAN: I'm sorry.</p> <p>25 Counsel on the phone, can you please</p>

<p style="text-align: right;">Page 10</p> <p>1 identify yourselves.</p> <p>2 MR. SCHINNER: This is Greg Schinner</p> <p>3 of Arnold &amp; Porter on behalf of the Endo and</p> <p>4 Par defendants.</p> <p>5 MR. ROMAN: Thank you.</p> <p>6 Anybody else.</p> <p>7 BY MR. ROMAN:</p> <p>8 Q. Sergeant Baeppler, could you please</p> <p>9 give your work address.</p> <p>10 A. 201 Payne Avenue in Cleveland, Ohio.</p> <p>11 Q. Do you also live in Cleveland?</p> <p>12 A. I've been advised not to tell you</p> <p>13 where I live. I live in the Cleveland area.</p> <p>14 Q. Is there any reason why you cannot</p> <p>15 give complete and truthful testimony today?</p> <p>16 A. No.</p> <p>17 Q. Have you ever had your deposition</p> <p>18 taken before?</p> <p>19 A. Yes.</p> <p>20 Q. On how many occasions?</p> <p>21 A. Two other occasions.</p> <p>22 Q. When were those?</p> <p>23 A. I don't recall the years. Several</p> <p>24 years ago.</p> <p>25 Q. Are you familiar with the process?</p>	<p style="text-align: right;">Page 12</p> <p>1 reason, we'd be happy to take one. Just let us</p> <p>2 know. The only exception to that is that</p> <p>3 there's a question pending.</p> <p>4 Do you understand that?</p> <p>5 A. Yes.</p> <p>6 Q. What did you do to prepare for your</p> <p>7 deposition today?</p> <p>8 A. I met with my attorneys.</p> <p>9 Q. Who specifically?</p> <p>10 A. I met with Fu and Craig Bashein.</p> <p>11 Q. And what is Fu's full name?</p> <p>12 MS. DEBROSSE: I'm sitting right</p> <p>13 here. That's a nickname everybody uses for me.</p> <p>14 MR. ROMAN: Okay. I did not know</p> <p>15 that.</p> <p>16 BY MR. ROMAN:</p> <p>17 Q. Anyone besides those two?</p> <p>18 A. No.</p> <p>19 Q. When did you meet with them?</p> <p>20 A. Over the past three, four days.</p> <p>21 Q. How many times?</p> <p>22 A. Three or four times.</p> <p>23 Q. What would you say is the total</p> <p>24 number of hours you spent preparing?</p> <p>25 A. I didn't keep track like that. I'm</p>
<p style="text-align: right;">Page 11</p> <p>1 A. Yes.</p> <p>2 Q. Were those depositions that were</p> <p>3 taken -- taken in your capacity as a decorative</p> <p>4 in the Cleveland police department or in</p> <p>5 another capacity?</p> <p>6 A. They were in my capacity as a police</p> <p>7 officer in the City of Cleveland.</p> <p>8 Q. Have you ever testified at trial?</p> <p>9 A. Yes.</p> <p>10 Q. On how many occasions?</p> <p>11 A. More than a hundred.</p> <p>12 Q. Have you ever testified at any</p> <p>13 legislative hearings?</p> <p>14 A. No.</p> <p>15 Q. So just a couple quick ground rules.</p> <p>16 If you have any questions about my question,</p> <p>17 you don't hear me, you don't understand me,</p> <p>18 please let me know. I'll be happy to restate</p> <p>19 or rephrase or whatever is necessary so that</p> <p>20 we're on the same wavelength.</p> <p>21 If you answer a question though, I'm</p> <p>22 going to assume you understood it.</p> <p>23 Do you understand that?</p> <p>24 A. Yes.</p> <p>25 Q. And if you need a break for whatever</p>	<p style="text-align: right;">Page 13</p> <p>1 guessing between eight to ten hours.</p> <p>2 Q. Was anyone else ever present during</p> <p>3 these meetings?</p> <p>4 A. No. Sometimes people would walk in</p> <p>5 my office. But, you know, they were just in</p> <p>6 there asking me a question about something.</p> <p>7 They weren't a part of any conversation.</p> <p>8 Q. Was anybody on the phone during any</p> <p>9 of these preparation sessions?</p> <p>10 A. Other than my attorneys, no.</p> <p>11 Q. Oh, they weren't in the office with</p> <p>12 you; they were on the phone?</p> <p>13 A. Some were telephonic conversations,</p> <p>14 and some were in person.</p> <p>15 Q. Have you discussed your expected</p> <p>16 testimony today with anyone other than counsel?</p> <p>17 A. My ex-wife, who I live with. I told</p> <p>18 her I am getting deposed, and that was it.</p> <p>19 Q. Anybody else?</p> <p>20 A. Told my father I was being deposed.</p> <p>21 That was it.</p> <p>22 Q. But you haven't discussed your</p> <p>23 expected testimony with any of your colleagues</p> <p>24 or your former colleagues?</p> <p>25 A. No.</p>

<p style="text-align: right;">Page 14</p> <p>1 Q. Have you reviewed any transcripts of</p> <p>2 any depositions taken in this case?</p> <p>3 A. No.</p> <p>4 Q. Have you reviewed any of the</p> <p>5 pleadings in this case, the complaint,</p> <p>6 interrogatory responses, anything like that?</p> <p>7 A. No. I haven't seen a whole lot of</p> <p>8 anything.</p> <p>9 Q. Were you involved at all or did you</p> <p>10 supply information at all in connection with</p> <p>11 the drafting of any of the pleadings, including</p> <p>12 the complaint and interrogatory responses?</p> <p>13 A. I wouldn't know because I didn't see</p> <p>14 them.</p> <p>15 Q. During these preparations sessions</p> <p>16 or otherwise, have you reviewed any documents</p> <p>17 in preparation for your testimony today?</p> <p>18 A. I reviewed a couple of documents the</p> <p>19 other day, yesterday. None of them were very</p> <p>20 substantial.</p> <p>21 Q. Do you recall what they were?</p> <p>22 A. I looked over a couple of e-mails.</p> <p>23 I looked over some printouts, some spreadsheets</p> <p>24 of some sort.</p> <p>25 Q. Do you remember what the e-mails</p>	<p style="text-align: right;">Page 16</p> <p>1 well, strike that.</p> <p>2 The documents you reviewed</p> <p>3 presumably had in the lower right-hand corner</p> <p>4 what we call a Bates number.</p> <p>5 Do you know what a Bates number is?</p> <p>6 A. No.</p> <p>7 Q. It's an identification. I can show</p> <p>8 you one here. Where it says, for example,</p> <p>9 "CLEVE," and then there's a number down there.</p> <p>10 A. Uh-huh.</p> <p>11 Q. Do you know whether or not the</p> <p>12 documents you reviewed had those numbers on it?</p> <p>13 A. I don't -- I wasn't looking for</p> <p>14 that. No. I -- they may have had it; they may</p> <p>15 not. I really don't know because I wasn't -- I</p> <p>16 didn't pay attention to that.</p> <p>17 Q. Did you do anything else to prepare</p> <p>18 for today, including did you conduct any</p> <p>19 independent research on the Internet or</p> <p>20 otherwise or anything else?</p> <p>21 A. No. Just -- no. I really didn't.</p> <p>22 I didn't do -- I got to let you know. I mean I</p> <p>23 haven't been in the HIDI task force for an</p> <p>24 extended period of time. So no.</p> <p>25 Q. Okay. So you're from Cleveland,</p>
<p style="text-align: right;">Page 15</p> <p>1 were about?</p> <p>2 A. I can't remember. I'm sure I'll</p> <p>3 remember later. I mean that's it right now.</p> <p>4 Like they there weren't -- it wasn't anything</p> <p>5 earth shattering. It wasn't anything of any</p> <p>6 real substance.</p> <p>7 Q. If I show you those e-mails today,</p> <p>8 will you please let me know?</p> <p>9 A. Uh-huh. I will.</p> <p>10 Q. Do you recall what the spreadsheet</p> <p>11 showed?</p> <p>12 A. Addresses.</p> <p>13 Q. Addresses of what?</p> <p>14 A. Addresses in the City of Cleveland</p> <p>15 that had some other coding along with it. But</p> <p>16 I had never seen it before, and I wasn't sure</p> <p>17 what to make of it.</p> <p>18 Q. These weren't just random addresses.</p> <p>19 Were they associated with overdose</p> <p>20 victims or some --</p> <p>21 A. They could have been. I don't know.</p> <p>22 I mean, like I said, I know they were addresses</p> <p>23 because I recognized the street names. But I</p> <p>24 couldn't tell you precisely what they were for.</p> <p>25 Q. Did you review any documents that --</p>	<p style="text-align: right;">Page 17</p> <p>1 right?</p> <p>2 A. Yes.</p> <p>3 Q. Did you go to college?</p> <p>4 A. Yes.</p> <p>5 Q. Where did you go to college?</p> <p>6 A. The University of Findlay.</p> <p>7 Q. University of Finland?</p> <p>8 A. Findlay.</p> <p>9 Q. Findlay.</p> <p>10 A. Findlay. Yep.</p> <p>11 Q. Okay. That's --</p> <p>12 A. It's in western Ohio.</p> <p>13 Q. I was going to say that's in Ohio?</p> <p>14 A. About 40 minutes south of Toledo.</p> <p>15 Q. Did you graduate?</p> <p>16 A. Yes.</p> <p>17 Q. In what year?</p> <p>18 A. '93 or '94.</p> <p>19 Q. With what kind of a degree?</p> <p>20 A. With a degree in history. And also</p> <p>21 certified in special education for teaching.</p> <p>22 Q. Have you received any other degrees</p> <p>23 or certifications or academic training?</p> <p>24 A. I have plenty of certificates in</p> <p>25 regarding my police work but none with -- in</p>

5 (Pages 14 - 17)

<p style="text-align: right;">Page 18</p> <p>1 terms of college credits.</p> <p>2 Q. What kind of certifications have you</p> <p>3 received in connection with your police work?</p> <p>4 A. Most of them are gang training. And</p> <p>5 other certificates -- numerous -- just for when</p> <p>6 we -- whenever you complete something in the</p> <p>7 City of Cleveland -- you know, it could be for</p> <p>8 whatever computer program they have going --</p> <p>9 you get a certificate for that or what have</p> <p>10 you. Most of them were for minor things,</p> <p>11 police related.</p> <p>12 Most of them, though, are gang</p> <p>13 stuff, ATF stuff for identifying persons</p> <p>14 carrying weapons, so forth.</p> <p>15 Q. Have you served any specialized</p> <p>16 training relating to drug use or drug abuse or</p> <p>17 opioid use or opioid abuse?</p> <p>18 MS. DEBROSSE: Object to form.</p> <p>19 You may answer, Sergeant.</p> <p>20 THE WITNESS: Can you repeat the</p> <p>21 question. There are several parts to that.</p> <p>22 I'm not as smart as you are, I'm sure.</p> <p>23 BY MR. ROMAN:</p> <p>24 Q. I wouldn't -- I would not assume</p> <p>25 that.</p>	<p style="text-align: right;">Page 20</p> <p>1 said, I can't remember the specifics on it.</p> <p>2 Q. When did you take that?</p> <p>3 A. A few years ago.</p> <p>4 Q. What do you recall about that</p> <p>5 course?</p> <p>6 Do you remember who sponsored it?</p> <p>7 A. No.</p> <p>8 Q. Did you receive any certification</p> <p>9 for having taken that?</p> <p>10 A. I don't recall.</p> <p>11 Q. Do you recall what it entailed?</p> <p>12 A. No. I mean just -- the problem I'm</p> <p>13 having is my personal experience and what I've</p> <p>14 learned, you know, I know about opioids just</p> <p>15 like I know about crystal meth, just like I</p> <p>16 know about marijuana. And most of it is</p> <p>17 on-the-job experience and in dealing with what</p> <p>18 people tell me, users, dealers and so forth and</p> <p>19 in other classes and in articles that I read.</p> <p>20 If I read an article, it may not</p> <p>21 necessarily be, you know, a class. And so over</p> <p>22 the years I can't tell you precisely where I</p> <p>23 learned what from. It's a collection of</p> <p>24 things.</p> <p>25 And I want -- I don't want to be</p>
<p style="text-align: right;">Page 19</p> <p>1 Have you received any specialized</p> <p>2 training relating to drugs or drug abuse?</p> <p>3 A. I've received specialized training</p> <p>4 in drugs, several drugs throughout the years.</p> <p>5 Q. Can you describe that training,</p> <p>6 please.</p> <p>7 A. It runs the gamut of everything. I</p> <p>8 have had training specifically dealing with</p> <p>9 methamphetamines, producing methamphetamines,</p> <p>10 how do deal with meth labs. Training in crack</p> <p>11 cocaine, training in heroin, training in</p> <p>12 marijuana and marijuana grows. Anything</p> <p>13 related to drugs in narcotics for the most part</p> <p>14 I've dealt with.</p> <p>15 Q. I'm referring right now to kind of</p> <p>16 specialized training where you're - the focus</p> <p>17 is on, you know, one or more street drugs.</p> <p>18 A. Throughout my career I've received</p> <p>19 training -- a lot of training. I can't recall</p> <p>20 every single training course I've been to. So</p> <p>21 I'm going to have to leave it at that.</p> <p>22 Q. Well, do you recall any trainings</p> <p>23 related specifically to opioids or opioid</p> <p>24 abuse?</p> <p>25 A. I did take an online course. Like I</p>	<p style="text-align: right;">Page 21</p> <p>1 untruthful with you. I'm just trying to, you</p> <p>2 know, lay it out, like I said. I mean I know</p> <p>3 about things, but I can't tell you exactly</p> <p>4 where I learned them all from.</p> <p>5 Q. Are you familiar with the term</p> <p>6 "prescription drug diversion"?</p> <p>7 A. I know what prescription drugs are,</p> <p>8 and I know what diversion is.</p> <p>9 Q. What is your understanding of</p> <p>10 diversion?</p> <p>11 A. It's obviously to send it in another</p> <p>12 direction. That the definition of diversion.</p> <p>13 Q. To send what in another direction?</p> <p>14 A. Anything. Whatever you're talking</p> <p>15 about. To divert.</p> <p>16 Q. So prescription drug diversion would</p> <p>17 be to send prescription drugs in another</p> <p>18 direction?</p> <p>19 A. That would be one definition, yes.</p> <p>20 Q. Would you use any others?</p> <p>21 A. Depending on the situation, I may.</p> <p>22 Q. Have you received any specialized</p> <p>23 training relating to prescription drug</p> <p>24 diversion?</p> <p>25 A. Not that I can recall.</p>



<p style="text-align: right;">Page 22</p> <p>1 Q. When you've taken the trainings for</p> <p>2 drugs and opioids, do you know what the costs</p> <p>3 have been associated with those trainings?</p> <p>4 Have there been charges for those</p> <p>5 trainings?</p> <p>6 MS. DEBROSSE: Object to form.</p> <p>7 THE WITNESS: I don't deal with the</p> <p>8 money part of it like that. So I have no idea</p> <p>9 what the cost is.</p> <p>10 BY MR. ROMAN:</p> <p>11 Q. And you don't know who pays for the</p> <p>12 cost -- who pays the cost?</p> <p>13 A. For the training?</p> <p>14 Q. Yes.</p> <p>15 A. Depends on -- sometimes the city</p> <p>16 pays for it. Sometimes we have to -- someone</p> <p>17 else paying for it. Sometimes they're free.</p> <p>18 But I don't know.</p> <p>19 Q. When there's somebody else paying</p> <p>20 for it, do you know who that is?</p> <p>21 Is that grants, or what is that?</p> <p>22 A. All depends on the situation.</p> <p>23 Sometimes they're grants. Sometimes the</p> <p>24 federal government pays. Sometimes the city</p> <p>25 pays. It all depends on where it's at and</p>	<p style="text-align: right;">Page 24</p> <p>1 Q. I meant post college.</p> <p>2 A. Post college? No. I just did some</p> <p>3 odd jobs here and there.</p> <p>4 Q. Okay. So I'm right that the only</p> <p>5 job you've -- full-time job you've had before</p> <p>6 taking a job with the Cleveland Police</p> <p>7 Department was being a jailer for the city; is</p> <p>8 that correct?</p> <p>9 A. Yes.</p> <p>10 Q. When did you begin working for the</p> <p>11 police department?</p> <p>12 A. Well, as a guard, which is part of</p> <p>13 the division of police in the jail. That was</p> <p>14 in 1994, I think in November. And then in June</p> <p>15 of 1995 I started at the police academy.</p> <p>16 Q. Okay. And for how long was that?</p> <p>17 A. The academy?</p> <p>18 Q. Yes.</p> <p>19 A. A few months.</p> <p>20 Q. And then after those few months were</p> <p>21 over, what was your position?</p> <p>22 A. Patrolman.</p> <p>23 Q. And for how long were you a</p> <p>24 patrolman?</p> <p>25 A. I was a patrolman for eight years.</p>
<p style="text-align: right;">Page 23</p> <p>1 evening else.</p> <p>2 Q. And do you have a sense of what</p> <p>3 percentage of your training has been paid for</p> <p>4 by the city as opposed to the federal</p> <p>5 government as opposed to through grants or as</p> <p>6 opposed to just free?</p> <p>7 MS. DEBROSSE: Object to form.</p> <p>8 THE WITNESS: I have no idea.</p> <p>9 BY MR. ROMAN:</p> <p>10 Q. After you graduated from the</p> <p>11 University of Findlay in '93 or '94, what was</p> <p>12 your first full-time job?</p> <p>13 Was it working for the police</p> <p>14 department or something else?</p> <p>15 A. I think I did an -- roof for a</p> <p>16 little bit. But then went and got a job as a</p> <p>17 jailer with the City of Cleveland. That was</p> <p>18 for about six months. Because I was on the</p> <p>19 list to become a policemen for the City of</p> <p>20 Cleveland.</p> <p>21 Q. Is that -- was being a jailer for</p> <p>22 the city your only job before joining the</p> <p>23 police department -- full-time job?</p> <p>24 A. No. I've had -- worked my way</p> <p>25 through college. I worked at Coca-Cola.</p>	<p style="text-align: right;">Page 25</p> <p>1 Q. So for some time in '95 to 2003?</p> <p>2 A. Somewhere about there. Then I was a</p> <p>3 detective in the first district.</p> <p>4 Q. When you were a patrolman, what were</p> <p>5 your responsibilities?</p> <p>6 A. I was in a zone car. And the duties</p> <p>7 are to patrol your assigned area, which would</p> <p>8 be -- there's -- there were six -- now there's</p> <p>9 five -- districts in the City of Cleveland.</p> <p>10 And they're broken up into zones. And so each</p> <p>11 zone car is responsible for a zone.</p> <p>12 Q. And you were policing all types of</p> <p>13 crimes, I assume?</p> <p>14 A. Uh-huh.</p> <p>15 Q. I need a "yes" or "no."</p> <p>16 A. Yes.</p> <p>17 Q. Then you became a detective sometime</p> <p>18 around 2003 in the first district, correct?</p> <p>19 A. Yes.</p> <p>20 Q. Okay. And for how long were you a</p> <p>21 detective in the first district?</p> <p>22 A. Not long. Maybe a year, two years</p> <p>23 maybe.</p> <p>24 Q. And what were your responsibilities</p> <p>25 as a first district detective?</p>

<p style="text-align: right;">Page 26</p> <p>1 A. To investigate felony crimes.</p> <p>2 Q. Did that include drug crimes?</p> <p>3 A. Sometimes, but usually not. But if</p> <p>4 a felony were to happen, then we'd deal with</p> <p>5 it. But for the most part they were -- there's</p> <p>6 a -- the vice unit would handle the drug</p> <p>7 crimes, and we would handle everything else.</p> <p>8 Q. And did you go from being a</p> <p>9 detective in the first district to the</p> <p>10 narcotics unit; is that right?</p> <p>11 A. Yes.</p> <p>12 Q. When did you start in the narcotics</p> <p>13 unit?</p> <p>14 A. 2004 or 2005. Somewhere in that</p> <p>15 area.</p> <p>16 Q. How did that come about?</p> <p>17 A. Came about -- when I was in the</p> <p>18 first district -- well, all right. The City of</p> <p>19 Cleveland, sometime in 2002 or '3 or somewhere</p> <p>20 in that area, they downsized; they had layoffs;</p> <p>21 and they dismantled the city gang unit.</p> <p>22 In the meantime, I was a detective</p> <p>23 in the bureau, and I had noticed certain crimes</p> <p>24 were being committed by gangs. And so what I</p> <p>25 did is I mapped out the gangs in the first</p>	<p style="text-align: right;">Page 28</p> <p>1 months, a year. Then I was brought back to the</p> <p>2 gang unit as a supervisor.</p> <p>3 And then a little over a year ago I</p> <p>4 was brought back to the narcotics unit.</p> <p>5 Q. Okay. So I'm trying to figure all</p> <p>6 this out. For those of us not in the</p> <p>7 department, it's hard to kind of keep</p> <p>8 everything straight.</p> <p>9 Is it true or is it not that you've</p> <p>10 been in the narcotics unit continuously from</p> <p>11 2004, 2005 to the present?</p> <p>12 A. Not continuously.</p> <p>13 Q. What periods were you not in the</p> <p>14 narcotics unit?</p> <p>15 A. After I got promoted, I went to the</p> <p>16 third district. It was four or five years ago.</p> <p>17 Q. So that was around 2014, 2015?</p> <p>18 A. Maybe '12 or '13.</p> <p>19 Q. Okay. So you were in the narcotics</p> <p>20 unit from 2004 or 2005 to around 2012 or 2013;</p> <p>21 is that correct?</p> <p>22 A. Uh-huh.</p> <p>23 Q. And during this time, were you also</p> <p>24 in the gang unit at any point or not?</p> <p>25 A. I worked with the gang unit, yes.</p>
<p style="text-align: right;">Page 27</p> <p>1 district and came up with the rosters and who</p> <p>2 was in the gang, how many were in them, what</p> <p>3 crimes had they committed.</p> <p>4 Downtown found out what I did, and</p> <p>5 then they wanted me to do that for the entire</p> <p>6 city. And since the gangs are closely</p> <p>7 connected to drugs, they sent me to the</p> <p>8 narcotics unit. And that's what I did.</p> <p>9 So I did a gang assessment for the</p> <p>10 entire city. So I was transferred there. And</p> <p>11 I would do gang investigations and drug</p> <p>12 investigations from there. And that's where I</p> <p>13 was for several years.</p> <p>14 Q. So you went to the -- are you still</p> <p>15 in the narcotics unit today?</p> <p>16 A. I'm in the narcotics unit today.</p> <p>17 But I hadn't always -- I mean there's been a</p> <p>18 couple of different places I've been since then</p> <p>19 in the meantime.</p> <p>20 But it's -- I've been in the</p> <p>21 narcotics unit. And then, when they did bring</p> <p>22 the gang unit back, I was still in the</p> <p>23 narcotics unit, but I was assigned as a detail</p> <p>24 to the gang unit. And then I was there. I got</p> <p>25 promoted. I went to the third district for six</p>	<p style="text-align: right;">Page 29</p> <p>1 That's who -- the crew I was with was in the</p> <p>2 gang unit. I was still in the narcotics unit,</p> <p>3 but I was -- I would operate every day with the</p> <p>4 gang unit.</p> <p>5 Q. Okay. And what were your</p> <p>6 responsibilities during this period 2004, 2005</p> <p>7 to 2012 to 2013?</p> <p>8 What exactly were you doing?</p> <p>9 A. We investigated gangs and narcotics.</p> <p>10 Because -- let me put it to you this way: Not</p> <p>11 every drug dealer is a gang member, but in my</p> <p>12 experience, every gang member is involved in</p> <p>13 drugs or drug dealing. And so they're pretty</p> <p>14 closely connected.</p> <p>15 And so our goal would be to deal</p> <p>16 with the gang members that were committing</p> <p>17 violent crimes. And we would investigate them</p> <p>18 and figure out who they are, build the rosters,</p> <p>19 and get the most violent ones off the street</p> <p>20 however we could in terms of, you know, putting</p> <p>21 a drug case, you know, on -- or building a drug</p> <p>22 case against them, weapons cases, so forth.</p> <p>23 Q. And when you moved to the third</p> <p>24 district in 2012 or 2013, what was your title,</p> <p>25 and what were your responsibilities?</p>



<p style="text-align: right;">Page 30</p> <p>1 A. I was what they -- what's considered 2 a road boss. I worked on third shift. And my 3 responsibilities were to oversee the patrolmen 4 and make sure they were doing what they were 5 supposed to be doing. Like make sure that they 6 responded to runs, correct their reports, so 7 forth. 8 Q. What was your formal title? 9 A. Sergeant. 10 Q. When did you become a sergeant? 11 A. 2012 or 2013. Somewhere around 12 there. 13 Q. And you're still a sergeant today? 14 A. Yes. 15 Q. And, in fact, you're wearing on 16 your -- a shirt that says "Sergeant in the Gang 17 Unit," correct? 18 A. Uh-huh. This is the nicest police 19 shirt I had. 20 Q. So you're still a sergeant in the 21 gang unit? 22 A. No. I'm a sergeant in the narcotics 23 unit. 24 Q. Okay. So when did you return to the 25 narcotics unit?</p>	<p style="text-align: right;">Page 32</p> <p>1 Involved Death Investigations squad, correct? 2 A. Yes. 3 Q. And that's also known as HIDI? 4 A. That's correct. 5 Q. When did you become involved with 6 that? 7 A. In October or November 2017. 8 Q. So that was in connection with your 9 move back to the narcotics unit? 10 A. Yes. Directly in connection with 11 it. 12 Q. And are those parallel 13 responsibilities, your responsibilities in the 14 narcotics unit and to HIDI? 15 MS. DEBROSSE: Object to the form. 16 Go ahead. 17 THE WITNESS: When you say 18 "parallel," I mean I'm assuming that you mean 19 like it's one in the same. It's not one in the 20 same, but it's close to it. 21 I still deal with other 22 investigations that aren't necessarily heroin. 23 But our primary responsibilities is HIDI, which 24 is a whole -- you know, it takes up most of our 25 time.</p>
<p style="text-align: right;">Page 31</p> <p>1 A. Returned to the narcotics unit in 2 October or November of 2017. 3 Q. So from 2012 or 2013 until late 4 2017, you were in the gang unit -- or no. I'm 5 sorry -- you were the sergeant in the third 6 district? 7 A. No. So I was in the third district. 8 I was there maybe a year, give or take, because 9 I was also detailed for several months back to 10 the gang unit as a supervisor. And that lasted 11 for four or five months. I went back for 12 another three, four months. Then I was 13 permanently brought back to the gang unit. 14 So I was doing my thing in the gang 15 unit for -- I don't know -- three years before 16 I went back to the narcotics unit. 17 Q. And that's where you are today? 18 A. Yes. And I know it's a little 19 complicated, a lot of movement. But going back 20 and forth to the same group. Because the gang 21 unit and the narcotic unit share the same 22 office space. 23 Q. Okay. And now let's add another 24 layer of complexity. 25 You're also involved with the Heroin</p>	<p style="text-align: right;">Page 33</p> <p>1 BY MR. ROMAN: 2 Q. When you say "our," you're referring 3 to the narcotics unit? 4 A. Yes. And also it involved HIDI. 5 That's -- the guys that are on the HIDI unit, 6 you know, they're -- that's what they work on 7 almost like solely. 8 Q. How many officers are in the 9 narcotics unit right now? 10 A. I don't recall. There's maybe a 11 dozen or so actively. You know, they're 12 detectives. 13 Q. And how many of those are members of 14 the HIDI squad? 15 A. About six or seven. 16 Q. And of those six or seven, how many 17 of them spend most of their time with HIDI? 18 A. Well, this -- those are on the HIDI 19 unit, six or seven -- that's what they do. 20 Q. Okay. 21 A. That's all they do. 22 Q. And what do the other five or six 23 members of the narcotics do? 24 A. The other members are involved with 25 other things. We have two detectives that are</p>

<p style="text-align: right;">Page 34</p> <p>1 in the diversion program. And then other 2 detectives are -- one of them is assigned to 3 the DEA, And a few more assigned to the -- to 4 an FBI task force. 5 Q. So the two detectives who are 6 assigned to diversion are Detective Patena and 7 Prince, correct? 8 A. Yes. 9 Q. Who is the one who is assigned to 10 DEA? 11 A. He doesn't do that. And I don't 12 really want to give out his name due to -- it's 13 -- he's in a very sensitive area, and he deals 14 with cartels on a regular basis. I'd just 15 prefer not to give his name. 16 Q. Who are the few who are assigned to 17 the FBI task force? 18 A. Detective Bino, Cudo, Negron, and 19 one more. I can't remember his name right now. 20 Edwards. 21 Q. Do you know what they do for the FBI 22 or the FBI task force? 23 A. They do large-scale arrests 24 involving wires. 25 Q. All drug-related though?</p>	<p style="text-align: right;">Page 36</p> <p>1 (Deposition Exhibit 1 was marked for 2 identification.) 3 BY MR. ROMAN: 4 Q. Sergeant Baeppler, I'm handing you 5 what has been marked as Exhibit 1. It is a 6 six-page document bearing production Nos. CLEVE 7 000180822 to 27. 8 And as you can see, it's an e-mail 9 chain, the top one of which is an e-mail dated 10 February 27, 2018, from Gary Gingell to Nicole 11 Carlton. And I'll note that you are not on 12 this e-mail chain. So I don't know whether or 13 not you've ever seen this document before. 14 Have you? 15 A. No, I have not. 16 Q. Okay. I want to direct your 17 attention -- you'll see the subject of the 18 e-mail is "HIDI Strategy 2018." 19 Do you see that? 20 A. Where is that? No, I don't. 21 Q. The subject line. Right there. 22 A. Okay. Yeah. I see it. 23 Q. Okay. And go towards the bottom of 24 the page. 25 You see the Gingell e-mail of 2:21</p>
<p style="text-align: right;">Page 35</p> <p>1 A. Yes. 2 Q. Deal with drugs? 3 A. All of them. You name it, they do 4 it. But most of them -- rarely marijuana, but 5 usually heroin now, cocaine, ecstasy sometimes, 6 fentanyl. 7 Q. What are your responsibilities as a 8 HIDI supervisor? 9 A. My responsibilities are to supervise 10 the detectives and make sure they show up on 11 runs, make sure they enter the proper documents 12 and just -- my job is to make sure that they're 13 doing their job basically. 14 Q. So do all of the six or seven 15 detectives who are part of HIDI report to you? 16 A. Yes. 17 Q. And to whom do you report? 18 A. I did report to Lieutenant Connelly. 19 He's now a commander. 20 Q. Who do you now report to? 21 A. Sergeant Haven. 22 Q. How do you spell that, please? 23 A. H-A-V-E-N. 24 And so -- yeah. That just started 25 like a couple of weeks ago.</p>	<p style="text-align: right;">Page 37</p> <p>1 p.m.? 2 You see that? 3 A. Right here? 4 Q. Yep. 5 A. Uh-huh. 6 Q. And then you look at the first line, 7 it says: "Sergeant Baeppler met with EMS 8 commanders yesterday." 9 Do you see that? 10 A. Uh-huh. 11 Q. And you go to the top -- the very 12 top e-mail on that page, and it says: "Matt 13 said the meeting went real well, and you guys 14 were very much on board." 15 Do you see that? 16 A. Uh-huh. 17 Q. Do you recall a HIDI strategy 18 meeting in or around 2018? 19 A. Vaguely. 20 Q. What do you recall of that meeting? 21 A. I believe we went there, and were 22 trying to get data regarding EMS responding to 23 overdoses so that we could more effectively 24 respond ourselves. 25 Q. Let me step back for a moment.</p>

<p style="text-align: right;">Page 38</p> <p>1 Do you recall where this meeting was</p> <p>2 held?</p> <p>3 A. I believe it was at EMS. If it's</p> <p>4 the right meeting I'm thinking of, it would be</p> <p>5 at EMS.</p> <p>6 Q. Do you recall who else was there?</p> <p>7 A. I don't remember their names, no.</p> <p>8 Q. Do you recall with which</p> <p>9 associations or organizations they were</p> <p>10 affiliated?</p> <p>11 A. I thought they were with EMS.</p> <p>12 Q. And do you recall whether you spoke</p> <p>13 at that meeting?</p> <p>14 A. Uh-huh.</p> <p>15 Q. Did you?</p> <p>16 A. I did speak.</p> <p>17 Q. What did you say?</p> <p>18 A. Basically what I asked you -- or I</p> <p>19 told you. I asked if there's a way that we</p> <p>20 could get info regarding how many times the EMS</p> <p>21 responds and uses NARCAN so that we can better</p> <p>22 track if we are responding to the overdoses.</p> <p>23 Q. And why did you want that</p> <p>24 information?</p> <p>25 A. To make sure that we were responding</p>	<p style="text-align: right;">Page 40</p> <p>1 course of action is, if they think it's</p> <p>2 possibly an overdose, they'll administer</p> <p>3 NARCAN. But sometimes it's ineffective because</p> <p>4 it's not an overdose.</p> <p>5 And once they figure that out, I</p> <p>6 guess they wouldn't notify the police. Because</p> <p>7 it could be another medical emergency. It</p> <p>8 could be a stroke or what have you.</p> <p>9 So what I try to do is I try and</p> <p>10 track it. Because, like I said, I want to go</p> <p>11 to as many of these overdoses as we can.</p> <p>12 Q. Do you know how many of these NARCAN</p> <p>13 administrations are false positives?</p> <p>14 A. No.</p> <p>15 Q. Now, you're also a supervisor of the</p> <p>16 compliance unit; is that right?</p> <p>17 A. Somewhat. Sergeant Ward does a</p> <p>18 little more on that. But yeah, I am. I --</p> <p>19 technically, I guess I could be. I see what</p> <p>20 they do.</p> <p>21 Q. And the compliance unit is within</p> <p>22 the narcotics unit, correct?</p> <p>23 A. That's correct.</p> <p>24 Q. Why do they call it the compliance</p> <p>25 unit?</p>
<p style="text-align: right;">Page 39</p> <p>1 to as many overdoses as possible so that we</p> <p>2 could gather information and combat the</p> <p>3 epidemic.</p> <p>4 Q. Was this the first time that you had</p> <p>5 made this request of EMS?</p> <p>6 A. I think it was. Somewhere in that</p> <p>7 time. I mean obviously -- I mean, yeah, this</p> <p>8 is the first time I spoke to them about it that</p> <p>9 I recall.</p> <p>10 Q. Have you since then been</p> <p>11 coordinating with EMS?</p> <p>12 A. I get e-mails every day.</p> <p>13 Q. And what e-mails -- what information</p> <p>14 do the e-mails convey?</p> <p>15 A. The NARCAN usage.</p> <p>16 Q. What have you learned from that</p> <p>17 data?</p> <p>18 A. Well, it's important for us to try</p> <p>19 and, you know, figure out if the NARCAN was</p> <p>20 used, if the police were called; and then if</p> <p>21 the police deemed it an overdose so that HIDI</p> <p>22 would be call so that we could investigate.</p> <p>23 Sometimes the -- they use NARCAN,</p> <p>24 but it's not necessarily and overdose; it's</p> <p>25 something different. Because their first</p>	<p style="text-align: right;">Page 41</p> <p>1 A. I don't know.</p> <p>2 Q. Do you know what its</p> <p>3 responsibilities are?</p> <p>4 A. It has to do with prescription</p> <p>5 drugs.</p> <p>6 Q. What about prescription drugs?</p> <p>7 A. They try and make sure that the</p> <p>8 prescription drugs, you know, aren't being</p> <p>9 distributed in an unlawful way.</p> <p>10 Q. How many detectives are there in the</p> <p>11 compliance unit?</p> <p>12 A. Two.</p> <p>13 Q. Detectives Patena and Prince?</p> <p>14 A. Yes.</p> <p>15 Q. Do you know when the compliance unit</p> <p>16 was created?</p> <p>17 A. No.</p> <p>18 (Deposition Exhibit 2 was marked for</p> <p>19 identification.)</p> <p>20 BY MR. ROMAN:</p> <p>21 Q. Sergeant Baeppler, I'm handing you</p> <p>22 what has been marked as Baeppler Exhibit 2. It</p> <p>23 is a six-page document bearing production Nos.</p> <p>24 CLEVE 001477213 through 18.</p> <p>25 Have you seen this document before,</p>

<p style="text-align: right;">Page 42</p> <p>1 at least parts of it?</p> <p>2 MS. DEBROSSE: Take your time to</p> <p>3 review it.</p> <p>4 BY MR. ROMAN:</p> <p>5 Q. Have you had a chance to review the</p> <p>6 document?</p> <p>7 A. Yes.</p> <p>8 Q. Have you seen it before, at least</p> <p>9 parts of it?</p> <p>10 A. Parts of it.</p> <p>11 Q. So you are indicated as having</p> <p>12 received the second-to-last e-mail in the chain</p> <p>13 from -- it's an e-mail dated April 4th of 2018.</p> <p>14 Do you see that?</p> <p>15 A. Uh-huh.</p> <p>16 Q. And you received this e-mail on or</p> <p>17 about that date in the ordinary course of</p> <p>18 business, correct?</p> <p>19 A. Uh-huh.</p> <p>20 Q. I need a "yes," please.</p> <p>21 A. Yes.</p> <p>22 Q. Thank you.</p> <p>23 Now, this was Brian Bailys of Ascent</p> <p>24 reaching out to you and others about</p> <p>25 participating in a conference entitled</p>	<p style="text-align: right;">Page 44</p> <p>1 Q. Did you participate in this</p> <p>2 conference?</p> <p>3 A. No, I did not.</p> <p>4 Q. Have you participated in other</p> <p>5 conferences related to the opioid crisis?</p> <p>6 A. When you say "conference," I mean I</p> <p>7 attend meetings. I can't really say they've</p> <p>8 been conferences.</p> <p>9 Q. You've never given any talks to</p> <p>10 groups about opioids?</p> <p>11 A. No.</p> <p>12 Q. Do you recall participating in a</p> <p>13 conference before the Ohio Tactical Officers</p> <p>14 Association regarding case investigations?</p> <p>15 A. I did. I -- that was -- that was</p> <p>16 basically like more of -- from my perspective,</p> <p>17 an officer safety issue with fentanyl and the</p> <p>18 dangers of fentanyl and what we're seeing and</p> <p>19 the forms that it's coming in.</p> <p>20 That was my part of the</p> <p>21 presentation.</p> <p>22 Q. The concern being officer exposure</p> <p>23 to fentanyl?</p> <p>24 A. Yes. That's -- yes. Because that's</p> <p>25 a risk, especially for tactical officers and so</p>
<p style="text-align: right;">Page 43</p> <p>1 "Community Wellness, The Opioid Crisis in</p> <p>2 2018," correct?</p> <p>3 A. Uh-huh. Yes.</p> <p>4 Q. Do you know what is Ascent?</p> <p>5 A. Yes.</p> <p>6 Q. What is Ascent?</p> <p>7 A. Basically it is a group of former</p> <p>8 addicted persons. And they try and get help</p> <p>9 for people that are addicted and provide them a</p> <p>10 way out --</p> <p>11 Q. Do you know whether --</p> <p>12 A. -- from addiction.</p> <p>13 Q. I'm sorry.</p> <p>14 Do --</p> <p>15 A. I'm sorry. They try and provide</p> <p>16 them a way out of addiction.</p> <p>17 Q. Do you know if they have any</p> <p>18 relationship with the Cleveland Police</p> <p>19 Department, either formal or informal?</p> <p>20 A. I believe it's informal. I don't</p> <p>21 know if it's formal or not. I've dealt with</p> <p>22 them a couple of times.</p> <p>23 Q. Do you know whether Ascent provides</p> <p>24 grant money to the police department?</p> <p>25 A. I have no idea.</p>	<p style="text-align: right;">Page 45</p> <p>1 forth. But, you know, others part -- you know,</p> <p>2 were part of the investigations and how we give</p> <p>3 examples of investigations.</p> <p>4 Q. Have you ever participated in a</p> <p>5 conference where Federal District Court Judge</p> <p>6 Polster was also a participant?</p> <p>7 A. Not that I'm aware of. I don't know</p> <p>8 what -- I mean, if he walked in the room, I</p> <p>9 wouldn't know what he looked like. So if he</p> <p>10 was there, I was aware of it. I don't know</p> <p>11 what he looks like.</p> <p>12 Q. Did you ever participate in a</p> <p>13 conference titled "Defining The Epidemic, Human</p> <p>14 and Economic Costs"?</p> <p>15 A. Where would that be at?</p> <p>16 Q. I presume somewhere in Cleveland.</p> <p>17 A. I don't recall that.</p> <p>18 Q. Do you also participate in any task</p> <p>19 forces?</p> <p>20 A. I am not assigned to any task force.</p> <p>21 Q. In general, for how long have you</p> <p>22 been involved in drug enforcement?</p> <p>23 A. My entire career I've been involved</p> <p>24 in drug enforcement.</p> <p>25 Q. So close to a quarter of a century?</p>

<p style="text-align: right;">Page 46</p> <p>1 A. 24 years, yes.</p> <p>2 Q. Is it fair to say that you've</p> <p>3 developed an understanding of which drugs are</p> <p>4 opioids and which drugs aren't?</p> <p>5 A. I have a fair understanding, yes.</p> <p>6 Q. Which drugs do you understand to be</p> <p>7 opioids?</p> <p>8 A. Well, you have fentanyl. You have</p> <p>9 the prescription base, which is a decent amount</p> <p>10 there. You have opium. You have heroin. You</p> <p>11 know, opioids are both synthetic and natural,</p> <p>12 versus the opiates are the natural part of the</p> <p>13 plant.</p> <p>14 Q. And what illegal drugs do you</p> <p>15 understand not to be opioids?</p> <p>16 A. Can you repeat that question. I'm</p> <p>17 not clear on that.</p> <p>18 Q. What illegal drugs do you understand</p> <p>19 not to be opioids?</p> <p>20 MS. DEBROSSE: Object to form.</p> <p>21 You may answer.</p> <p>22 THE WITNESS: Can I read the</p> <p>23 question? I mean I'm having a hard time</p> <p>24 following it.</p> <p>25 You're saying what illegal drugs --</p>	<p style="text-align: right;">Page 48</p> <p>1 Q. You understand that -- well, not all</p> <p>2 -- not all opioids are prescription opioids,</p> <p>3 correct?</p> <p>4 A. Yes.</p> <p>5 Q. Now, do you use the terms "opioid</p> <p>6 epidemic" and "opioid crisis"?</p> <p>7 A. I've said "opioid epidemic," but I</p> <p>8 don't think I've ever said "opioid crisis."</p> <p>9 Q. Okay. When you use the phrase</p> <p>10 "opioid epidemic," what does that mean to you?</p> <p>11 A. It means what I live every day.</p> <p>12 That's what it means to me. It means showing</p> <p>13 up to a run, dealing with people that are dead</p> <p>14 or near death and then dealing with the</p> <p>15 aftermath with their families and everything</p> <p>16 else.</p> <p>17 That would be an epidemic to me.</p> <p>18 Because that's every day that I deal with it.</p> <p>19 I guess an epidemic would be something you deal</p> <p>20 with every day that's pretty much out of</p> <p>21 control.</p> <p>22 Q. Well, when you use the term "opioid</p> <p>23 epidemic," does this include all opioids,</p> <p>24 including nonprescription drugs?</p> <p>25 A. Yes, it does.</p>
<p style="text-align: right;">Page 47</p> <p>1 BY MR. ROMAN:</p> <p>2 Q. Are not opioids.</p> <p>3 A. The illegal drugs that are not</p> <p>4 opioids are methamphetamines, cocaine, so</p> <p>5 forth, and everything that I didn't say.</p> <p>6 Q. Now, dealing specifically with the</p> <p>7 opioids, you understand that some of them are</p> <p>8 available by prescription, whereas others are</p> <p>9 available only illegally, correct?</p> <p>10 A. Yes.</p> <p>11 Q. You understand that prescription</p> <p>12 opioids are pills like Vicodin and Percocet and</p> <p>13 OxyContin?</p> <p>14 A. I do understand that.</p> <p>15 Q. And that the nonprescription opioids</p> <p>16 are illegal street drugs like heroin, illicit</p> <p>17 fentanyl and carfentanil, correct?</p> <p>18 A. Yes.</p> <p>19 Q. And so you understand that</p> <p>20 prescription opioids is a narrower category</p> <p>21 than opioids?</p> <p>22 MS. DEBROSSE: Object to form.</p> <p>23 THE WITNESS: Repeat the question</p> <p>24 for me.</p> <p>25 BY MR. ROMAN:</p>	<p style="text-align: right;">Page 49</p> <p>1 Q. Do you have a belief or</p> <p>2 understanding of what caused the opioid</p> <p>3 epidemic?</p> <p>4 A. Yes, I do.</p> <p>5 Q. What is that belief or</p> <p>6 understanding?</p> <p>7 A. Every time that I deal with somebody</p> <p>8 that is a heroin addict or a -- another opioid</p> <p>9 addict, I ask them questions. One of the</p> <p>10 questions I ask of everybody is, "How did this</p> <p>11 begin? How did this happen?"</p> <p>12 Many people tell me that they</p> <p>13 started taking pills for one reason or another,</p> <p>14 an injury. Many of them are -- were high</p> <p>15 school athletes or doctors, lawyers, nurses,</p> <p>16 other police officers.</p> <p>17 And they began taking pills for a</p> <p>18 surgery that they went in for. And they --</p> <p>19 they started taking them, and they realized</p> <p>20 that they couldn't stop. They were cut off at</p> <p>21 some point.</p> <p>22 The next closest thing they could</p> <p>23 get to the pills would be the heroin,</p> <p>24 effect-wise, I mean the high that they would</p> <p>25 get from it. And that's what the majority of</p>



<p style="text-align: right;">Page 50</p> <p>1 them started with.</p> <p>2 So yes. If you're asking me how did</p> <p>3 this start, my belief and my personal</p> <p>4 experience is that they started with the pills.</p> <p>5 Q. And do you record your conversations</p> <p>6 with them anywhere?</p> <p>7 I mean do you write down notes or</p> <p>8 anything like that?</p> <p>9 A. No.</p> <p>10 Q. Okay.</p> <p>11 A. It's a general question. And this</p> <p>12 is also -- when we would make buys -- when I</p> <p>13 was undercover, we'd make buys with someone,</p> <p>14 and -- or -- and I'd be sitting in the car with</p> <p>15 the CI. So -- okay. The point being the CI</p> <p>16 would introduce me as a drug-addicted person</p> <p>17 and like one of their friends. And so the hope</p> <p>18 would be to get the CI out of the picture, and</p> <p>19 then I would deal with the main drug dealer.</p> <p>20 But in the meantime, you're sitting</p> <p>21 with this person for hours. So like when -- if</p> <p>22 a drug dealer says, "Hey, I'm around the</p> <p>23 corner," most of the time he's spinning you.</p> <p>24 "Around the corner" could be he's around the</p> <p>25 corner in another state, for all we know.</p>	<p style="text-align: right;">Page 52</p> <p>1 But most of them are a legitimate medical</p> <p>2 reason or whatever it is. But most of them say</p> <p>3 pills.</p> <p>4 Q. Okay. Well, let's start at that</p> <p>5 point though when you're talking about pills.</p> <p>6 Do you know whether, with respect to</p> <p>7 those who started on pills, how many of those</p> <p>8 started because they were lawfully prescribed</p> <p>9 by a licensed physician?</p> <p>10 A. I don't know. I don't know that</p> <p>11 answer.</p> <p>12 Q. So you don't know, for example, what</p> <p>13 percent got diverted prescription drugs versus</p> <p>14 who got pills through, you know, a properly</p> <p>15 licensed doctor for a legitimate injury?</p> <p>16 A. I really -- I didn't always delve</p> <p>17 into that. I couldn't give you an exact</p> <p>18 number. Some of them were -- a lot of them</p> <p>19 were from doctors. Some of them were -- you</p> <p>20 know, they would get them in their parents'</p> <p>21 closets or -- you know, pill closets.</p> <p>22 Q. I guess my question is you don't</p> <p>23 know what percent of the 80 percent started off</p> <p>24 with prescriptions from a properly licensed</p> <p>25 doctor, do you?</p>
<p style="text-align: right;">Page 51</p> <p>1 But it's hours and hours you spend</p> <p>2 with these -- the drug-addicted persons. And</p> <p>3 that's part of the -- we have lots of</p> <p>4 conversations.</p> <p>5 So no, I don't write down the entire</p> <p>6 conversations with have.</p> <p>7 Q. When you say "many," can you</p> <p>8 quantify that?</p> <p>9 Well, strike that.</p> <p>10 When you say many started with</p> <p>11 prescription pills, can you quantify that? Is</p> <p>12 it 50 percent? Is it 60 percent? 70? 80?</p> <p>13 Do you have a sense?</p> <p>14 A. Over 80 percent. In my opinion. In</p> <p>15 my experience. I mean there's maybe others</p> <p>16 that have a different experience. But my own</p> <p>17 personal experience is 80 percent,</p> <p>18 approximately. That is -- like I said, that's</p> <p>19 my feeling.</p> <p>20 Q. And to be clear, those are people</p> <p>21 who started on prescription pills because of an</p> <p>22 injury or for some other medical reason --</p> <p>23 legitimate medical reason and then moved on</p> <p>24 from there?</p> <p>25 A. Or just pills in general, yes. Yes.</p>	<p style="text-align: right;">Page 53</p> <p>1 MR SMITH: Objection.</p> <p>2 THE WITNESS: Over 50 percent of the</p> <p>3 80 percent, I would guess.</p> <p>4 BY MR. ROMAN:</p> <p>5 Q. Is it a guess?</p> <p>6 A. Over -- over half. Okay. That's --</p> <p>7 if you're asking me to put a percentage on it,</p> <p>8 that's -- that would be my percentage of that.</p> <p>9 Q. So --</p> <p>10 A. I mean that I -- that I got a</p> <p>11 definitive answer from. That it started from a</p> <p>12 surgery or what have you.</p> <p>13 Q. Do you know how much over half?</p> <p>14 Is it 51 percent, is it 60 percent,</p> <p>15 is it 70 percent of the 80 percent?</p> <p>16 A. Over 50 percent is the best I can</p> <p>17 give you.</p> <p>18 Q. Okay. Do you know how many of -- of</p> <p>19 that -- again, going back to the 80 percent who</p> <p>20 went from prescription pills to heroin.</p> <p>21 Do you know what percentage of those</p> <p>22 got started on counterfeit pills, thinking that</p> <p>23 they were taking prescription pills but, in</p> <p>24 fact, they were taking something else?</p> <p>25 A. We've only just recently seen</p>



<p style="text-align: right;">Page 54</p> <p>1 counterfeit pills. In my experience, we've 2 only just recently seen counterfeit pills. And 3 that's -- that's been a new trend. 4 Q. Starting when, do you think? 5 A. In my experience, in the last year, 6 that I've personally seen them. 7 Q. In your mind, when did the opioid 8 epidemic begin? 9 A. I'm going to say in the -- sometime 10 in the 2000 -- we started -- we started to see 11 a real problem in about 2008, 2009. And it got 12 progressively worse. 13 And I base that on -- when I started 14 in the narcotics unit, we dealt almost ex -- it 15 was almost all crack or crack cocaine and 16 cocaine in forms almost exclusively. Within a 17 matter of six years or so, it switched to -- it 18 like literally flip flopped into now everyone's 19 selling heroin, dealer-wise. 20 So we'd have the same dealer that I 21 dealt with, you know, in let's say 2008; and in 22 2015 now -- you know, in 2008 he's selling 23 crack and cocaine. Now he's selling crack and 24 heroin or just heroin. 25 Q. Do you have a sense of what caused</p>	<p style="text-align: right;">Page 56</p> <p>1 But what I'm asking is, you know, 2 you said that the -- it really started going in 3 2008 or 2009. You're aware that these pills 4 were on the market a long time before 2008 or 5 2009. 6 What happened, what changed such 7 that the opioid epidemic really started to 8 gather steam around that time? 9 MS. DEBROSSE: Object to form. 10 THE WITNESS: I can't answer that 11 question. I don't have the exact answer. 12 BY MR. ROMAN: 13 Q. In your work, do you distinguish 14 between lawful use of opioids and unlawful use 15 of opioids? 16 A. Yes. 17 Q. How so? 18 A. People have valid injuries. People 19 have cancer. They're in tremendous pain. 20 There are times when -- if someone's -- if 21 someone's on their death bed, you should make 22 them as comfortable as possible until their 23 ultimate demise. 24 If someone is -- if someone no 25 longer has an injury but they're still taking</p>
<p style="text-align: right;">Page 55</p> <p>1 the switchover in around 2008 or 2009? 2 A. When you say do I have a sense, 3 what's your exact question? 4 Q. What happened? What changed? 5 A. My belief is that, when people 6 stopped getting the pills with a -- 7 specifically with OxyContin, then -- you know, 8 people couldn't get pills as readily, and, you 9 know, now they were -- now they're addicted to 10 these pills, these opioids. So then they're 11 cut off, but they still -- they were addicted. 12 So they went to the next best thing, which 13 would be heroin. 14 Q. And when do you think they started 15 really getting hooked on these prescription 16 pills? 17 A. When they were -- when they started 18 using them. I mean I don't know if you're -- 19 you've got to be aware of -- these pills are 20 extremely addictive. I mean in three days you 21 can turn a regular person into an addict, 22 depending on the person's body composition. 23 Some people become addicted easier 24 than others. 25 Q. I understand that, sir.</p>	<p style="text-align: right;">Page 57</p> <p>1 the same pills, then that would be unlawful. 2 Q. Well, have you or anyone else on the 3 police department ever arrested anyone who was 4 taking prescription opioids as prescribed by a 5 doctor? 6 MS. DEBROSSE: Object to form. 7 THE WITNESS: I'm sure it's 8 possible. 9 BY MR. ROMAN: 10 Q. Do you recall any instance where 11 you've done that? 12 A. Not offhand. 13 Q. Have you ever encountered a 14 situation where someone is lawfully using 15 prescription opioids as prescribed by a 16 legitimate doctor, but that person comes to the 17 attention of the police because of addiction or 18 overdose? 19 MS. DEBROSSE: Object to form. 20 THE WITNESS: I can't recall anyone. 21 BY MR. ROMAN: 22 Q. For this next set of questions, I 23 want to break down drugs into four categories: 24 illegal nonopioids, cocaine, meth, things of 25 that nature; nonprescription opioids, heroin,</p>

<p style="text-align: right;">Page 58</p> <p>1 fentanyl; diverted or otherwise illicit  2 prescription opioids; and then legal  3 prescription opioids.  4 Do you understand that?  5 A. I do.  6 Q. Since you have been with the  7 narcotics unit, what percentages of the  8 overdoses -- overdose cases to which you've  9 responded have involved prescription opioids,  10 categories three or four, as opposed to illegal  11 nonopioids or nonprescription opioids,  12 categories 1 and 2?  13 MS. DEBROSSE: Object to form.  14 THE WITNESS: Can you repeat that  15 question, please.  16 BY MR. ROMAN:  17 Q. Sure.  18 What percentages -- what percentage  19 of the overdoses to which you have responded  20 have involved prescription opioids, which is  21 the third and fourth categories, as opposed to  22 illegal nonopioids or nonprescription opioids?  23 A. It's kind of hard to give a  24 percentage. And let me explain something here.  25 Since I -- I'm a supervisor in the</p>	<p style="text-align: right;">Page 60</p> <p>1 Now -- and so I've responded to  2 scenes where there's a crushed-up pill or  3 tablet. I can't tell you what it is. Matter  4 of fact, if they crush up a tablet, I can't  5 tell you if it's an illegal drug to begin with  6 or what it is. We don't know what it is until  7 it's tested. And we don't find out for weeks  8 later.  9 So I can't give you a definitive  10 answer on that. Most of the ones we do respond  11 to, many, are either heroin or heroin fentanyl  12 or cocaine fentanyl.  13 Q. That's lion's share?  14 A. In my experience. But, like I said,  15 I mean I could be a little bit wrong on that.  16 But yeah, that is what I -- that's my  17 experience.  18 Q. By the way, when you earlier give me  19 that 80 percent figure -- do you recall that  20 from about ten minutes ago?  21 A. Uh-huh.  22 Q. For what period of time are we  23 talking there when you were --  24 A. That's from when I was a detective  25 in the first district and in my time in the</p>
<p style="text-align: right;">Page 59</p> <p>1 HIDI unit. I don't respond to every single  2 nonfatal overdose. Matter of fact,  3 percentage-wise, I respond to only a few just  4 to make sure -- or -- that the detectives are  5 asking the right questions and doing what  6 they're supposed to be doing and, in the  7 beginning, just so I saw how they did what they  8 were supposed to do.  9 I respond mostly to fatalities. I  10 respond almost to all fatalities. So frankly, if  11 these guys -- you would have to ask another  12 detective what they are responding to. And  13 even then, they don't respond to all of them.  14 But in terms of my own experience,  15 if you're asking that -- how many people have I  16 responded to that have used a prescription  17 drug -- correct? That was legally obtained or  18 illegally obtained?  19 Q. Either one. Either diverted or  20 illicit prescription opioids or illegal  21 prescription opioids.  22 A. The other problem I have with that  23 is I don't know I'm seeing if it's a  24 counterfeit prescription drug or if it's a real  25 prescription drug.</p>	<p style="text-align: right;">Page 61</p> <p>1 gang unit when we were -- when we would make  2 buys for heroin.  3 Q. So what years are we talking?  4 A. 2003 or so all the way through 2012,  5 '13.  6 Q. Do you know if that has been the  7 experience of the police department over the  8 last five, six years?  9 A. That's my experience.  10 MS. DEBROSSE: Object to form.  11 BY MR. ROMAN:  12 Q. But you don't know whether that has  13 continued at that same rate since then?  14 MS. DEBROSSE: Object to form.  15 THE WITNESS: I don't know.  16 MR. ROMAN: Just a few more  17 questions, and then we'll take a break, if  18 that's okay with you.  19 THE WITNESS: Perfect.  20 BY MR. ROMAN:  21 Q. Of the overdoses that have  22 involved -- again, where you've come to the  23 scene -- have involved prescription opioids, do  24 you know what percent of those have been  25 diverted as opposed to used lawfully?</p>

<p style="text-align: right;">Page 62</p> <p>1 A. I don't know.</p> <p>2 Q. Now, you told me earlier about</p> <p>3 people who you believed began with prescription</p> <p>4 opioids.</p> <p>5 Do you know some -- has it ever been</p> <p>6 the case where somebody starts with one drug,</p> <p>7 goes to prescription opioids, and then</p> <p>8 overdoses on something else?</p> <p>9 A. When you say "one drug," can you</p> <p>10 define that more?</p> <p>11 Q. Start with cocaine.</p> <p>12 A. So you're saying they start with</p> <p>13 cocaine, and then they...</p> <p>14 Q. Go to a prescription -- a diverted</p> <p>15 prescription pill or a prescription -- or a</p> <p>16 prescription opioid of any type and then -- but</p> <p>17 overdose on heroin or fentanyl.</p> <p>18 A. I can't think of any offhand. And I</p> <p>19 would think that would be kind of rare, just</p> <p>20 because cocaine is a different -- it's in a</p> <p>21 different realm. I mean that's a different</p> <p>22 class. It's an upper. And the heroin and the</p> <p>23 opioids is a downer. They're almost two</p> <p>24 different worlds.</p> <p>25 So rarely do we have someone that</p>	<p style="text-align: right;">Page 64</p> <p>1 alive, you ask those who are around about the</p> <p>2 drug history.</p> <p>3 How far back do you go?</p> <p>4 Do you say -- you know, do you ask</p> <p>5 what they were taking just that day? Do you</p> <p>6 ask for the past month? Do you ask for at the</p> <p>7 beginning of time?</p> <p>8 How far back do you go?</p> <p>9 MS. DEBROSSE: Object to form.</p> <p>10 You may answer, Sergeant.</p> <p>11 THE WITNESS: I ask many of them how</p> <p>12 it started. And I ask family members how it</p> <p>13 started. And many of them -- you know, many of</p> <p>14 them, unfortunately, they're everyday people.</p> <p>15 They get started -- you know, most of -- a lot</p> <p>16 of them are -- are or were athletes that got</p> <p>17 hooked from their surgeries. So that does</p> <p>18 happen.</p> <p>19 BY MR. ROMAN:</p> <p>20 Q. Right.</p> <p>21 But -- and just -- you don't</p> <p>22 record -- the Cleveland Police Department does</p> <p>23 not record this information anywhere or keep</p> <p>24 statistics about this, does it?</p> <p>25 A. Not that I'm aware of. But</p>
<p style="text-align: right;">Page 63</p> <p>1 uses heroin and cocaine. Like I said, they're</p> <p>2 for different personality types. I personally</p> <p>3 don't know anyone that -- that that's happened</p> <p>4 to. I'm sure it's happened.</p> <p>5 And I can't tell you the exact order</p> <p>6 that it's happened. Like I've talked to people</p> <p>7 that have used heroin and cocaine. But I don't</p> <p>8 know what they started with. So I can't answer</p> <p>9 that.</p> <p>10 Q. Well, I was just using cocaine as</p> <p>11 the example and obviously a bad one.</p> <p>12 But are you aware of cases where</p> <p>13 somebody starts with one drug, uses</p> <p>14 prescription opioids, and then overdoses on</p> <p>15 heroin or fentanyl?</p> <p>16 MS. DEBROSSE: Object to form.</p> <p>17 THE WITNESS: Based on your</p> <p>18 question, I can't come up with anyone.</p> <p>19 MR. ROMAN: Last question, and then</p> <p>20 we'll take a break.</p> <p>21 BY MR. ROMAN:</p> <p>22 Q. When you've come to the scene of an</p> <p>23 overdose and you're asking -- if the victim is</p> <p>24 alive, I assume you asked the victim about his</p> <p>25 drug history; or if he's not alive or she's not</p>	<p style="text-align: right;">Page 65</p> <p>1 that's -- but that is my own personal thing</p> <p>2 that I ask. And it's always because I'm</p> <p>3 curious. That's a quirk that I have. I'm</p> <p>4 trying to figure out, trying to get in the mind</p> <p>5 of this addicted person.</p> <p>6 Q. Do you know whether others do the</p> <p>7 same, other detectives?</p> <p>8 A. I don't know.</p> <p>9 MR. ROMAN: Why don't we take a</p> <p>10 break.</p> <p>11 THE WITNESS: Thank you.</p> <p>12 (A short recess was taken.)</p> <p>13 BY MR. ROMAN:</p> <p>14 Q. Going back to where we were before</p> <p>15 the break, Sergeant Baeppler, when you gave me</p> <p>16 that 80 percent figure.</p> <p>17 That was based, was it not, on your</p> <p>18 conversations with ICs in cars back when you</p> <p>19 were doing undercover, correct?</p> <p>20 A. And when I was a detective as well</p> <p>21 in the first district.</p> <p>22 Q. When you were a detective in the</p> <p>23 first district, with whom were those</p> <p>24 conversations?</p> <p>25 A. Most of those conversations were</p>

<p style="text-align: right;">Page 66</p> <p>1 with addicted persons, you know, that were 2 involved in other crimes. Let's say that they 3 were doing burglaries or what have you. And it 4 went from there. 5 Like so we'd arrest them. We would 6 arrest people, and then they would confess to 7 committing these burglaries. And they say, "I 8 do it because I'm an addict." It just starts 9 from there. 10 Q. And since 2012 or 2013, have you had 11 any of these types of conversation either with 12 CIs or with suspects? 13 A. Yes. 14 Q. How many of those have you had since 15 then? 16 A. It's hard to quantify it, but 17 several. 18 Q. Several like three or -- 19 A. Several dozen. 20 Q. Several dozen. Okay. 21 And have you been asking the same 22 types of questions? 23 A. I asked -- this question I ask 24 almost everyone: "How did this start? How did 25 you start? How did this road to where you're</p>	<p style="text-align: right;">Page 68</p> <p>1 terms of what drugs were the most prominent 2 drugs over the timing in the enforcement? 3 Was there a time when it was 4 cocaine? Was there a time when it was meth? 5 Was there a time when it was heroin? Was there 6 a time when it was prescription pills? 7 Can you kind of take us through 8 that? 9 MS. DEBROSSE: Object to form. 10 You can answer, Sergeant. 11 THE WITNESS: Some of these were 12 trends. Some of them were -- the meth was like 13 it splashed in and splashed back out, you know. 14 But when I first started, crack 15 cocaine was king. 16 BY MR. ROMAN: 17 Q. So that's mid '90s? 18 A. Mid '90s, crack. Then -- a little 19 bit of heroin. Almost all crack. And even 20 then, heroin would only be during a certain 21 time of day and certain locations. 22 I mean there's like two parts of the 23 city, one east, one west. And that's pretty 24 much where everyone went to get heroin. And 25 then the rest of the city was crack and like</p>
<p style="text-align: right;">Page 67</p> <p>1 at begin?" 2 Q. And as the -- because I think you 3 said before this 80 percent was up until 2012 4 or 2013. 5 Has the percentage, in your mind, 6 increased or decreased? 7 I know the sample size is only three 8 dozen, but -- or several dozen? 9 A. It's several. It's not just three. 10 It's several. 11 But your question is what now? I 12 mean how many -- 13 Q. Are you finding -- in the last 14 six -- five, six, seven years, have you found 15 the percentage of those who overdose who 16 started on prescription pills increasing or 17 decreasing from that 80 percent figure you gave 18 me earlier? 19 A. It's about the same. 20 Q. Okay. Now, during your three 21 decades in law enforcement in Cleveland, have 22 you ever known a time when abusive drugs has 23 not been a problem in the community? 24 A. No. 25 Q. Can you please provide a timeline in</p>	<p style="text-align: right;">Page 69</p> <p>1 cocaine a little bit here and there, like 2 powder form of cocaine as well. 3 And then we -- that went all the way 4 through -- I want to say -- I can't remember 5 the years, but then we had some meth thrown in 6 there. And as meth started, there was also the 7 -- we'd start to see more heroin and the 8 OxyContin pills. 9 Q. When did the OxyContin start to 10 appear on the scene? 11 A. To the best of my recollection, I 12 want to say -- I remember seeing -- on the 13 streets I started seeing some of them in 2008, 14 '9, '10. And then '11, '12, you know, I was 15 doing a lot of meth search warrants and meth 16 activity. And then, during the same period of 17 time, the changeover was when the heroin or 18 opioids in general. 19 Q. When was the first time that you 20 were aware of an overdose on a prescription 21 pill, prescription opioid? 22 A. I can't answer that definitively 23 because there -- because we don't -- I don't 24 know what people overdose from all the time. 25 And it's based on -- when you get to</p>

<p style="text-align: right;">Page 70</p> <p>1 a scene, you have a crushed-up pill or 2 crushed-up whatever. 3 Q. Right. 4 A. It's a powder at that point. I 5 don't know what that is. I don't know if it's 6 a pill. I don't know if it's -- if it's 7 another controlled substance. We just don't -- 8 all you know is it's a powder. 9 So, you know, for me to answer that 10 accurately, I mean I can't. I just can't. 11 Because if you're asking me do I see pills 12 there also, you know, most people only get two 13 or three -- most drug-addicted persons only get 14 one or two, and they only get what they're 15 going to use at that point in time. 16 Q. Well, do you find out after the fact 17 what that crushed powder was? 18 A. Sometimes we do; sometimes we don't. 19 As a supervisor, I don't always do that. I 20 mean because it's -- the detective whose case 21 it is, they would know. I wouldn't know 22 offhand. And like I said, I can't give you a 23 number like that. I can't give you like a 24 total -- I mean one person or anything else 25 like that at in defining moment.</p>	<p style="text-align: right;">Page 72</p> <p>1 Q. Well, it was before you were on the 2 police force, wasn't it? 3 MS. DEBROSSE: Object to form. 4 THE WITNESS: I don't know. I 5 assume it was. 6 BY MR. ROMAN: 7 Q. Do you know why -- what change that 8 made prescription pills a source of a -- of the 9 -- a source of the opioid epidemic in 10 Cleveland -- 11 MS. DEBROSSE: Object to form. 12 BY MR. ROMAN: 13 Q. -- given that they were -- they've 14 been available for decades? 15 MS. DEBROSSE: Object to form. 16 THE WITNESS: Can you repeat that 17 question for me. 18 BY MR. ROMAN: 19 Q. Sure. 20 You testified this morning that -- 21 or earlier this morning, I should say, that you 22 believe that prescription pills have played a 23 role in the opioid epidemic. 24 A. Yes. 25 Q. And if I represent to you that there</p>
<p style="text-align: right;">Page 71</p> <p>1 Q. I understand that you -- that you 2 don't always know what caused an overdose. 3 But sometimes you do, correct? 4 A. Sometimes we do. 5 Q. When you do know what caused the 6 overdose, when was the first time you were 7 aware of somebody overdosing on a prescription 8 pill, prescription opioid? 9 A. I don't know. I can't recall 10 someone that I can definitively say overdosed 11 on a prescription pill. 12 Q. How often do you find people 13 overdose on prescription pills as opposed to 14 overdosing on heroin or fentanyl? 15 A. My experience is -- whether it's a 16 counterfeit pill, we don't know. But it's 17 usually the fentanyl-related that they overdose 18 on. That's my experience. 19 Q. Now, do you know when prescription 20 opioids first started being prescribed in 21 Cleveland? 22 A. I don't. I imagine -- you know, 23 prescription -- you know, how long has -- no. 24 I don't know. I'm sure it's been several 25 years.</p>	<p style="text-align: right;">Page 73</p> <p>1 have been prescription pills available -- 2 prescription opioids, such as Percocet and 3 Vicodin, available in the 1970s, OxyContin in 4 the mid 1990s, why was it not until 2008, 2009 5 that they started contributing to the opioid 6 epidemic? 7 MS. DEBROSSE: Object to form. 8 THE WITNESS: Are you asking for my 9 theory, my feeling on this? Is that what 10 you're asking me? 11 BY MR. ROMAN: 12 Q. What's your understanding? 13 MS. DEBROSSE: Object to form. 14 THE WITNESS: My belief is that 15 there was a large number of these pills 16 available that were available to persons that 17 would probably normally not have them, which 18 then created a market. 19 I mean it's like with anything. You 20 flood the market with a product, get people 21 hooked on them, and it goes from there. That's 22 what happens in business and everything else. 23 BY MR. ROMAN: 24 Q. Do you know who flooded the market 25 with prescription opioids?</p>



<p style="text-align: right;">Page 74</p> <p>1 A. I couldn't tell you. I don't --</p> <p>2 Counselor, I don't -- I don't have a cable TV.</p> <p>3 I don't even have an antenna. I don't watch</p> <p>4 the news on a regular basis. Yes, I follow</p> <p>5 general trends and stuff like that. I mean I</p> <p>6 read.</p> <p>7 But I don't know the companies. I</p> <p>8 don't know anything else like that.</p> <p>9 I do know that at one point</p> <p>10 OxyContin was a big thing. We would see a lot</p> <p>11 of OxyContin. People would talk about</p> <p>12 single-sack and double-sack oxy's. And -- but</p> <p>13 when I first came out, we didn't have that.</p> <p>14 Q. When you were -- people were talking</p> <p>15 about the oxy's, do you recall about when that</p> <p>16 was?</p> <p>17 A. Early 2000. Somewhere around there.</p> <p>18 I can't put an exact year to it. But somewhere</p> <p>19 in that time frame is when -- that would be</p> <p>20 when I first would -- I first saw that.</p> <p>21 Q. Have you or anyone else at the -- in</p> <p>22 the Cleveland Police Department ever</p> <p>23 investigated doctors who may have</p> <p>24 overprescribed opioids?</p> <p>25 A. Detective Prince has.</p>	<p style="text-align: right;">Page 76</p> <p>1 A. For certain, no. I believe he has</p> <p>2 but not -- I don't know for certain. I know he</p> <p>3 keeps tracks on the pharmacies. I mean he</p> <p>4 works with the pharmacies.</p> <p>5 Q. How about the pill mills; has you or</p> <p>6 anyone else in the police department ever</p> <p>7 investigated pill mills?</p> <p>8 MS. DEBROSSE: Object to form.</p> <p>9 THE WITNESS: Can you define a pill</p> <p>10 mill?</p> <p>11 BY MR. ROMAN:</p> <p>12 Q. Well, are you familiar with the</p> <p>13 term?</p> <p>14 A. It depends on what your definition</p> <p>15 of it is, I guess.</p> <p>16 What's your definition of a pill</p> <p>17 mill?</p> <p>18 Q. Well, I would define it as a place</p> <p>19 where prescriptions are basically</p> <p>20 indiscriminately -- where opioids are</p> <p>21 indiscriminately prescribed, where patients</p> <p>22 come in for short visits and are given</p> <p>23 prescriptions basically on demand.</p> <p>24 A. Yes. I'm aware of investigations</p> <p>25 about that.</p>
<p style="text-align: right;">Page 75</p> <p>1 Q. How about Detective Patena?</p> <p>2 A. She may have been like on the</p> <p>3 periphery. But I believe she keeps track of</p> <p>4 some other things.</p> <p>5 Q. Do you know how many doctors</p> <p>6 Detective Prince has investigated?</p> <p>7 A. No.</p> <p>8 Q. Do you know the results of any of</p> <p>9 those investigations?</p> <p>10 A. Yes.</p> <p>11 Q. What happened?</p> <p>12 A. I believe he's got convictions or</p> <p>13 pleas on almost all of them.</p> <p>14 Q. Do you know how many?</p> <p>15 A. No.</p> <p>16 Q. How about pharmacies; do you know</p> <p>17 whether anyone has ever -- you or has anyone</p> <p>18 else in the Cleveland Police Department ever</p> <p>19 investigate a pharmacy for overfilling</p> <p>20 prescriptions or engaging in other forms of</p> <p>21 diversion?</p> <p>22 A. I think -- that would be Detective</p> <p>23 Prince's role, not mine.</p> <p>24 Q. Do you know whether he's done that</p> <p>25 or not?</p>	<p style="text-align: right;">Page 77</p> <p>1 Q. And do you know the results of any</p> <p>2 of those investigations?</p> <p>3 A. I think they were successful</p> <p>4 investigations with either plea agreements or</p> <p>5 convictions.</p> <p>6 Q. Have you shut down any pill mills</p> <p>7 or...</p> <p>8 A. I've never been the lead in any</p> <p>9 investigation like that. I believe that they</p> <p>10 have been shut down though.</p> <p>11 Q. Do you know who was the lead in any</p> <p>12 of those investigations?</p> <p>13 A. Detective Prince would do that.</p> <p>14 Q. What is the division</p> <p>15 responsibilities between Detective Prince and</p> <p>16 Detective Patena?</p> <p>17 It seems like you keep on saying</p> <p>18 Detective Prince.</p> <p>19 What's she doing?</p> <p>20 A. She helps him out with most of his</p> <p>21 investigations and -- like the last thing that</p> <p>22 I dealt with her on would be like there was a</p> <p>23 theft from a pharmacy, and so she was working</p> <p>24 on that.</p> <p>25 Q. Do you know whether the police</p>

20 (Pages 74 - 77)



<p style="text-align: right;">Page 78</p> <p>1 department has ever investigated a manufacturer 2 or distributor of prescription opioids? 3 A. I don't know. 4 Q. You've never done that? 5 A. I've never -- I've never 6 investigated any like thing like-- no, I have 7 not. 8 Q. Have you ever done any diversion 9 investigations? 10 A. I've been part of some diversion 11 investigations. 12 Q. What types? 13 A. I was a undercover in a pill mill. 14 Q. Where was that? 15 A. I think Cleveland Height or 16 Shaker Heights or something like that. 17 Q. When was it? 18 A. A few years ago. 19 Q. And what did you find? 20 A. I found I would go into a -- I was 21 sent into a doctor's office, and a doctor would 22 give me a quick check and then ask if I was in 23 any pain. And he would give me a prescription 24 for pills. 25 Q. Based simply on your say-so?</p>	<p style="text-align: right;">Page 80</p> <p>1 identification.) 2 BY MR. ROMAN: 3 Q. Sergeant Baeppler, I'm handing you 4 what's been marked as Baeppler Exhibit 3. This 5 is a one-page document bearing production No. 6 CLEVE 000189730. 7 Have you seen this document before? 8 A. No. Not that I can recollect. 9 Q. Okay. Well, I would like to direct 10 your attention to the bottom of the -- well, 11 strike that. 12 Exhibit 3 is an e-mail exchanged 13 dated June 22nd, 2017. 14 Do you see that? 15 A. Uh-huh. 16 Q. I'm sorry. I need a "yes." 17 A. Yes. 18 Q. And the bottom e-mail is an e-mail 19 from Gary Gingell to a whole bunch -- well, to 20 Mr. Tomba and Mr. Drummond. And a whole bunch 21 of folks are copied, including you. 22 Do you see that? 23 A. Yes. 24 Q. Do you have any reason to believe 25 that you did not receive that e-mail on or</p>
<p style="text-align: right;">Page 79</p> <p>1 A. Yes. 2 Q. Did you arrest the doctor? 3 A. I did not. 4 Q. Why not? 5 A. Because I wasn't part of the arrest. 6 Q. Did the police department arrest the 7 doctor? 8 A. Eventually they did. I think he 9 fled to Hawaii or something. 10 Q. And you shut down the pill mill? 11 A. Yes. 12 Q. Now, we've talked about fentanyl 13 some this morning. 14 Are you aware that fentanyl is a -- 15 there is some forms of fentanyl that are 16 available by prescription? 17 A. Yes. And fentanyl can be a useful 18 tool in, you know, alleviating pain. 19 Q. When you see the overdoses in 20 Cleveland though, I take it that in every 21 case -- in virtually every case, if not every 22 case, the fentanyl that's involved is illicit 23 or illegal fentanyl, correct? 24 A. Most of them are, yes. 25 (Deposition Exhibit 3 was marked for</p>	<p style="text-align: right;">Page 81</p> <p>1 about June 22, 2017, in the ordinary course of 2 business? 3 A. I'm sure I did receive it if it's on 4 here. 5 Q. Okay. I'd like to direct your 6 attention to the second-to-last paragraph of 7 that bottom e-mail that begins "Not for media." 8 Do you see that? 9 A. Uh-huh. 10 Q. Again, I'm sorry. I need a "yes." 11 A. Yes. 12 Q. And it reads: "Had a meeting with 13 DEA boss Keith Martin yesterday. We both agree 14 this problem will continue to grow due to 15 web-based trafficking out of China, Asian and 16 European countries." 17 Do you see that? 18 A. Yes. 19 Q. And the problem -- you understood 20 that the problems to which Mr. Gingell refers 21 is heroin overdoses. 22 That's the subject of this exchange, 23 correct? 24 MS. DEBROSSE: Object to form. 25 THE WITNESS: The subject is heroin</p>

<p style="text-align: right;">Page 82</p> <p>1 stats, nonfatals and fatals, 2013 through '17.</p> <p>2 BY MR. ROMAN:</p> <p>3 Q. So we're talking about heroin</p> <p>4 overdoses, correct?</p> <p>5 A. Yes.</p> <p>6 Q. I just want to show you something</p> <p>7 Sergeant Baeppler. This is the caption from</p> <p>8 the complaint in this case. And I just -- I'm</p> <p>9 going to be referring to the defendants as a</p> <p>10 group. And I just want to make sure that you</p> <p>11 see who the defendants are.</p> <p>12 A. That's quite a lot.</p> <p>13 Q. Yes, it is.</p> <p>14 MS. DEBROSSE: Are you making it as</p> <p>15 an exhibit?</p> <p>16 MR. ROMAN: No. Not our choice.</p> <p>17 BY MR. ROMAN:</p> <p>18 Q. Anyway, would you look at that list,</p> <p>19 please.</p> <p>20 A. I looked.</p> <p>21 Q. Are you familiar with any of the</p> <p>22 companies on that list?</p> <p>23 A. I've heard of them before, yes.</p> <p>24 Some of them, not all of them.</p> <p>25 Q. Which ones have you heard of?</p>	<p style="text-align: right;">Page 84</p> <p>1 from.</p> <p>2 Q. What are those ideas?</p> <p>3 A. Most of the heroin that we encounter</p> <p>4 in Cleveland comes from Mexico.</p> <p>5 Q. Is that the black tar heroin or</p> <p>6 other forms?</p> <p>7 A. We don't secure a lot of black tar</p> <p>8 anymore. Most of it is powder heroin.</p> <p>9 Q. Okay. Are you aware of heroin also</p> <p>10 coming in from China and other foreign</p> <p>11 countries?</p> <p>12 A. I'm sure it comes in. But the --</p> <p>13 most of what we see in Cleveland, from what I</p> <p>14 understand, comes from Mexico and other -- you</p> <p>15 know, it comes through Mexico. I'm sure that</p> <p>16 there's other ways to get it in. But it's my</p> <p>17 experience that it's Mexican-cartel based, as</p> <p>18 are most of the drugs we get.</p> <p>19 Q. How about the fentanyl; where does</p> <p>20 that come from?</p> <p>21 A. Most of the fentanyl, that I know</p> <p>22 of, most of it comes from China. That's where</p> <p>23 it's produced I believe. And -- but we're also</p> <p>24 seeing it coming in from the Mexican cartels</p> <p>25 also.</p>
<p style="text-align: right;">Page 83</p> <p>1 A. Purdue, Johnson &amp; Johnson, Discount</p> <p>2 Drug Mart, CVS, Rite Aid, Walgreens.</p> <p>3 I may have seen those other ones</p> <p>4 before, but I don't recall.</p> <p>5 Q. Okay. Had you encountered any of</p> <p>6 these companies in the course of your police</p> <p>7 work?</p> <p>8 A. I may have dealt with Johnson &amp;</p> <p>9 Johnson, but it was with a totally unrelated</p> <p>10 thing. It had to with a baby formula case, a</p> <p>11 theft of baby formula.</p> <p>12 Q. Other than that, you've had no</p> <p>13 dealing with any of these entities in your</p> <p>14 police work?</p> <p>15 A. Not that I recall.</p> <p>16 Q. And I take it you are not aware of</p> <p>17 any of them being involved in the manufacture,</p> <p>18 distribution or sale of heroin?</p> <p>19 MS. DEBROSSE: Object to form.</p> <p>20 THE WITNESS: Not that I'm aware of.</p> <p>21 BY MR. ROMAN:</p> <p>22 Q. Do you have an understanding from</p> <p>23 where the heroin that you've encountered in</p> <p>24 Cleveland comes from?</p> <p>25 A. I have some ideas where it comes</p>	<p style="text-align: right;">Page 85</p> <p>1 Q. Do you know why Mr. Gingell did not</p> <p>2 want to disclose the media that he and DEA boss</p> <p>3 Keith Martin agree that the heroin problem will</p> <p>4 continue to grow due to web-based trafficking</p> <p>5 out of China, Asian and European countries?</p> <p>6 MS. DEBROSSE: Object to form.</p> <p>7 THE WITNESS: I don't know why -- I</p> <p>8 mean I can't answer for him. So it's difficult</p> <p>9 for me to say.</p> <p>10 (Deposition Exhibit 4 was marked for</p> <p>11 identification.)</p> <p>12 BY MR. ROMAN:</p> <p>13 Q. Sergeant Baeppler, I'm handing you</p> <p>14 what has been marked as Baeppler Exhibit 4.</p> <p>15 It's a one-page document bearing production No.</p> <p>16 CLEVE 000179751.</p> <p>17 Have you seen this document before?</p> <p>18 A. Yes.</p> <p>19 Q. So why don't we -- as you'll see</p> <p>20 there, there are two e-mails on the page. I</p> <p>21 want to focus on the e-mail that you sent on</p> <p>22 May 25, 2018, to Mr. Gingell.</p> <p>23 Do you see that?</p> <p>24 A. Yes.</p> <p>25 Q. And you sent this e-mail to him on</p>

<p style="text-align: right;">Page 86</p> <p>1 or about that date in the ordinary course of 2 business, correct? 3 A. Yes. 4 Q. Now, I'd like to direct your 5 attention to the first line of that e-mail 6 where you say: "Since Wednesday we've seen a 7 sharp uptick in the overdoses reported on the 8 east side." 9 Do you see that? 10 A. Yes, I do. 11 Q. And do you know to what that was 12 referring? 13 A. Yes. 14 Q. What was that? 15 A. There had been several -- as I say, 16 "spike." There has been several overdoses in a 17 certain area. It's cause for concern because I 18 mean obviously people are dying or they're near 19 dying. 20 It's also an officer safety issue. 21 Because many officers are aware that there's 22 fentanyl in all -- in virtually all the drugs 23 that we come across now. And if you touch 24 fentanyl and you don't have the right 25 protection, you could possibly overdose.</p>	<p style="text-align: right;">Page 88</p> <p>1 in here to be accurate, correct? 2 A. Yes, I do. 3 Q. Now, in this e-mail you discuss ten 4 overdoses, correct? 5 A. Yes. 6 Q. Of those ten, only one of those 7 involved pills, correct? 8 A. Yes. 9 Q. And is that typical that, you know, 10 a small percentage, you know, on the order of 11 10 percent, of overdoses involve pills? 12 MS. DEBROSSE: Object to form. 13 THE WITNESS: That would be -- that 14 we believed to be pills. This -- you know, 15 when we get these -- when you notice it says 16 "heroin" or it says "crack," it doesn't really 17 say I mean heroin/fentanyl or crack/fentanyl. 18 So I'm merely assuming here that 19 this is what they are. So yes, from what you 20 can see from here, the -- like specifically the 21 one on Fulton, pills and K2. 22 Q. Well, with nine of the ten cases you 23 have no basis to believe that pills were 24 involved, correct? 25 A. Correct.</p>
<p style="text-align: right;">Page 87</p> <p>1 So obviously that's why I said, you 2 know, it should be put out there to wear the 3 neoprene gloves when handing. 4 Q. And where did you get the 5 information that's set forth in this e-mail? 6 Where did it come from? 7 MS. DEBROSSE: Object to form. 8 THE WITNESS: It came from my 9 detectives. 10 BY MR. ROMAN: 11 Q. Do you know which detectives? 12 A. Not offhand. I mean I was on the 13 fatals. 14 Q. I'm sorry. 15 What about the fatals? 16 A. I would have responded -- I can tell 17 you for sure that two of the fatals, if not all 18 of them -- I'm not positive about the Fulton 19 one, but I think was there too. 20 Q. So some of these are based on 21 personal experience, and some are your 22 detectives reporting to you in -- as part of 23 their responsibilities, correct? 24 A. Yes. 25 Q. And you believe all the information</p>	<p style="text-align: right;">Page 89</p> <p>1 Q. And I'm asking is that typical, that 2 in most overdose cases there's no evidence that 3 pills were involved? 4 A. I can't tell you whether the pills 5 are involved or not because I don't know when 6 they crush them. I mean like we have a powder. 7 I'd love to be able to answer your question. 8 But definitively, if it's a crushed powder -- 9 it's a powder, it could have been a pill at one 10 point in time. We just don't know. 11 Q. Okay. But here you're making -- 12 A. Because. 13 Q. Sorry. I shouldn't have interrupted 14 you. 15 A. No. I shouldn't have interrupted 16 you. Go ahead, sir. 17 Q. Well, I think I was the one 18 interrupting you, but I will continue. 19 Okay. Here, based on all your years 20 of experience, you have made judgments as to 21 what drugs you believe were involved in the 22 overdose, correct? 23 A. Yes. 24 Q. Okay. And in nine of the ten cases, 25 pills weren't involved, correct?</p>

<p style="text-align: right;">Page 90</p> <p>1 A. That I can tell, yes.</p> <p>2 Q. And that's what you do.</p> <p>3 A. Yes. With this -- with these</p> <p>4 current cases at that time, yes, this is what I</p> <p>5 believe them to be.</p> <p>6 Q. And did you subsequently learn that</p> <p>7 any of your preliminary assessments were</p> <p>8 incorrect?</p> <p>9 A. I don't remember what the end result</p> <p>10 was. But I believe that my -- I'm sure that</p> <p>11 the -- the lab results would show that there's</p> <p>12 -- you know, they could break down the</p> <p>13 compounds that were found. I don't know what</p> <p>14 they are offhand.</p> <p>15 Q. So what I'm asking is -- you know,</p> <p>16 whether it's based on your preliminary</p> <p>17 assessment or after you've had confirmation</p> <p>18 from the lab -- what percentage of overdoses do</p> <p>19 you find caused by pills as opposed to heroin</p> <p>20 or crack or fentanyl or other drugs?</p> <p>21 A. I don't know how to answer that.</p> <p>22 Because I don't know specifically what the</p> <p>23 percentages are. I mean it's kind of hard --</p> <p>24 it's next to impossible for me to nail down</p> <p>25 what the percentages are without looking at all</p>	<p style="text-align: right;">Page 92</p> <p>1 Q. And that's not an opioid, is it?</p> <p>2 A. No.</p> <p>3 Q. Directing your attention to the</p> <p>4 third line, you see there's a parenthetical:</p> <p>5 "Likely a crack fentanyl mix"?</p> <p>6 Do you see that?</p> <p>7 A. Yes, I do.</p> <p>8 Q. And that's something that you find</p> <p>9 with some frequency, isn't it, that fentanyl is</p> <p>10 mixed in with other drugs?</p> <p>11 A. In Cleveland, fentanyl is mixed with</p> <p>12 almost every other drug. I've -- we've had</p> <p>13 fentanyl mixed with everything now. Marijuana,</p> <p>14 heroin, coke, crack. It's my experience that,</p> <p>15 yeah, it's mixed with a lot of things.</p> <p>16 It's not mixed with -- every single</p> <p>17 time you buy marijuana, there's not fentanyl in</p> <p>18 it. But you just don't know if it's going to</p> <p>19 be in there or not.</p> <p>20 Q. And when people buy these other</p> <p>21 drugs -- marijuana, crack, coke -- they may or</p> <p>22 may not know if that fentanyl is in there,</p> <p>23 correct?</p> <p>24 A. It's my belief, especially when</p> <p>25 they're buying cocaine or marijuana, that they</p>
<p style="text-align: right;">Page 91</p> <p>1 the lab results.</p> <p>2 Q. Well, you can say for sure, can't</p> <p>3 you, that it's less than half?</p> <p>4 A. More than likely, yes.</p> <p>5 Q. Can you go to less than a quarter?</p> <p>6 A. I'll stick with less than half.</p> <p>7 I'll go on the safe side.</p> <p>8 Q. Okay. Did you know the type of</p> <p>9 crushed pill that was involved?</p> <p>10 Do you anything -- what was -- what</p> <p>11 pill had been crushed?</p> <p>12 A. I don't recall.</p> <p>13 Q. Did you know whether it was a</p> <p>14 prescription opioid or not?</p> <p>15 A. I don't recall.</p> <p>16 Q. Reading this e-mail, can you tell</p> <p>17 what it was?</p> <p>18 A. No. Because I don't recall. I mean</p> <p>19 I -- if there's a crushed pill, it would be</p> <p>20 because of -- probably be part of it wasn't</p> <p>21 crushed all the way.</p> <p>22 Q. Okay. And then the person who</p> <p>23 overdosed on the pills and K2 -- K2 is</p> <p>24 synthetic marijuana, correct?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 93</p> <p>1 believe that there's not any in there. And</p> <p>2 there's a number of reasons why it could be in</p> <p>3 there.</p> <p>4 Q. Okay. But when they -- so even</p> <p>5 though that person may overdose on an opioid,</p> <p>6 fentanyl, the person taking that drug, the</p> <p>7 fentanyl -- I mean the marijuana or the coke,</p> <p>8 has no idea they're doing opioids, correct?</p> <p>9 A. That's my impression.</p> <p>10 Q. Turning to your last sentence. I</p> <p>11 believe this is the -- this refers to the</p> <p>12 safety issues that you were talking about</p> <p>13 earlier.</p> <p>14 You say: "I recommend all crack,</p> <p>15 cocaine, K2, and heroin confiscated be treated</p> <p>16 as if it were laced with fentanyl and to wear</p> <p>17 neoprene gloves when handling."</p> <p>18 Is that was you were -- that's the</p> <p>19 safety concern you were expressing earlier?</p> <p>20 A. Yes, it is.</p> <p>21 Q. And this is illicit fentanyl, not</p> <p>22 prescription fentanyl, correct?</p> <p>23 A. Yes.</p> <p>24 (Deposition Exhibit 5 was marked for</p> <p>25 identification.)</p>

<p style="text-align: right;">Page 94</p> <p>1 BY MR. ROMAN:</p> <p>2 Q. Sergeant Baeppler, I'm handing you</p> <p>3 what has been marked as Exhibit 5. It's a</p> <p>4 multi-page document bearing production Nos.</p> <p>5 CLEVE 002231597 through 1607.</p> <p>6 Have you seen this document before?</p> <p>7 A. I may have. I mean I see a lot of</p> <p>8 documents. I mean I'm not saying I didn't.</p> <p>9 Q. But you're familiar with these types</p> <p>10 of documents?</p> <p>11 A. Yes, I am.</p> <p>12 Q. Okay. And this is from the Cuyahoga</p> <p>13 County medical examiner's office?</p> <p>14 A. Yes.</p> <p>15 Q. And Cleveland doesn't have its own</p> <p>16 medical examiner, does it?</p> <p>17 A. If they do, I'm unaware of it.</p> <p>18 Q. So the medical examiner that you use</p> <p>19 in your overdose cases is the Cuyahoga County</p> <p>20 medical examiner, correct?</p> <p>21 A. Yes.</p> <p>22 Q. Do you know who collected the data</p> <p>23 that's used in this report?</p> <p>24 A. I would imagine the medical examiner</p> <p>25 or the Medical Examiner's Office.</p>	<p style="text-align: right;">Page 96</p> <p>1 now. I see there's and squares and triangles.</p> <p>2 Q. Yeah. I think that's the helpful --</p> <p>3 I'm color-blind, so this is difficult for me as</p> <p>4 well.</p> <p>5 But if you look at the symbols, I</p> <p>6 think that's the helpful part.</p> <p>7 A. Okay. I looked at it.</p> <p>8 Q. Okay. First of all, do you know</p> <p>9 what falls under the category "All Opioids Not</p> <p>10 Including Fentanyl"?</p> <p>11 A. I have an idea.</p> <p>12 Q. What's that ideas?</p> <p>13 A. All other opioids, like we discussed</p> <p>14 earlier, except for fentanyl. So that would</p> <p>15 include any prescription drugs as well as</p> <p>16 heroin.</p> <p>17 Q. Okay. If you look, for example, at</p> <p>18 -- let's go to 2017. And you have the top --</p> <p>19 the top cause of overdose deaths is fentanyl at</p> <p>20 477.</p> <p>21 Do you see that?</p> <p>22 A. Yes.</p> <p>23 Q. And then you go next to cocaine at</p> <p>24 349.</p> <p>25 Do you see that?</p>
<p style="text-align: right;">Page 95</p> <p>1 Q. Do you know how the data were</p> <p>2 collected?</p> <p>3 MS. DEBROSSE: Object to form.</p> <p>4 THE WITNESS: No. I don't know</p> <p>5 precisely how they're collected.</p> <p>6 BY MR. ROMAN:</p> <p>7 Q. Let's go to Page 601, please.</p> <p>8 That's -- I'm looking at the Bates number in</p> <p>9 the lower right-hand corner.</p> <p>10 A. I got you.</p> <p>11 Q. The top of the page says: "Cuyahoga</p> <p>12 County Overdose Deaths 2006 to 2018."</p> <p>13 Do you see that?</p> <p>14 A. Yes, I do.</p> <p>15 Q. And you will see that for 2018 those</p> <p>16 figures are projected.</p> <p>17 Do you see that?</p> <p>18 A. Yes.</p> <p>19 Q. Why don't you take a moment and look</p> <p>20 at the figures here, and let me know when</p> <p>21 you've had an opportunity to look at that.</p> <p>22 A. I'm having a hard time tracking what</p> <p>23 lines. Because it just looks like -- there's a</p> <p>24 gray line and a black line, and I can't really</p> <p>25 tell the difference between all of them right</p>	<p style="text-align: right;">Page 97</p> <p>1 A. Yes.</p> <p>2 Q. Then you go to all opioids not</p> <p>3 including fentanyl at 250.</p> <p>4 Do you see that?</p> <p>5 MS. DEBROSSE: Object to form.</p> <p>6 THE WITNESS: Yes.</p> <p>7 MR. ROMAN: What'd I get wrong</p> <p>8 there?</p> <p>9 MS. DEBROSSE: I'm trying to find --</p> <p>10 where are you?</p> <p>11 MR. ROMAN: 2017. It's the</p> <p>12 second-to-last one.</p> <p>13 MS. DEBROSSE: Ask your question</p> <p>14 again for me.</p> <p>15 MR. ROMAN: I was just going down</p> <p>16 the -- maybe -- if you hand me yours, I'll mark</p> <p>17 it up. I'll show you exactly what I'm doing if</p> <p>18 you hand me yours.</p> <p>19 BY MR. ROMAN:</p> <p>20 Q. So you saw the 250 for all opioids</p> <p>21 not including fentanyl. You have 250.</p> <p>22 Than you have carfentanil of 192.</p> <p>23 Do you see that?</p> <p>24 A. Yes.</p> <p>25 Q. And then you have heroin at 106.</p>

25 (Pages 94 - 97)



<p style="text-align: right;">Page 98</p> <p>1 Do you see that?</p> <p>2 A. Yes.</p> <p>3 Q. Do those numbers seem about right to</p> <p>4 you?</p> <p>5 This is all Cuyahoga County as</p> <p>6 opposed to Cleveland.</p> <p>7 MS. DEBROSSE: Object to form.</p> <p>8 THE WITNESS: I don't know if</p> <p>9 they're right or not. I mean because I didn't</p> <p>10 -- didn't come over until the end of 2017.</p> <p>11 BY MR. ROMAN:</p> <p>12 Q. Let me ask, in your experience in</p> <p>13 Cleveland -- in your experience in Cleveland,</p> <p>14 if you had to rate the drugs in terms of</p> <p>15 causing overdose deaths, how would you -- what</p> <p>16 is the order in which you would put them?</p> <p>17 What's number one? What's number</p> <p>18 two? What's number three? What's number four?</p> <p>19 What's number five?</p> <p>20 A. I would put them at -- I would</p> <p>21 categorize them as drugs that have fentanyl in</p> <p>22 them, including fentanyl, as the number one.</p> <p>23 Q. How about number two and number</p> <p>24 three?</p> <p>25 A. I don't know. I mean -- because I</p>	<p style="text-align: right;">Page 100</p> <p>1 So let's claw back 00026712 and</p> <p>2 document 00026712. Under the rules, of course,</p> <p>3 you can maintain one copy for your record.</p> <p>4 I'll take the rest back, please.</p> <p>5 MR. ROMAN: (Proffered documents.)</p> <p>6 MS. DEBROSSE: Thank you, sir.</p> <p>7 MS. BARBER: Are you just clawing</p> <p>8 back the second page or the first page as well?</p> <p>9 MR. ROMAN: The first page is not</p> <p>10 the issue.</p> <p>11 MS. DEBROSSE: The second page is</p> <p>12 the issue.</p> <p>13 MR. McLAUGHLIN: If you're not</p> <p>14 clawing back --</p> <p>15 (Discussion held off the record.)</p> <p>16 MS. DEBROSSE: Let me look at this</p> <p>17 e-mail. Give me a second. I don't want to</p> <p>18 overdesignate and make you guys pissed. So</p> <p>19 just give me a minute, and let me look at this</p> <p>20 e-mail.</p> <p>21 Let's just redact the e-mail. And</p> <p>22 we've clawed back the documents that were</p> <p>23 produced that I've identified.</p> <p>24 MS. BARBER: Can we have an actual</p> <p>25 copy of the e-mail.</p>
<p style="text-align: right;">Page 99</p> <p>1 believe that most of the overdoses are related</p> <p>2 to fentanyl. And so I think almost all of them</p> <p>3 have fentanyl in them or another analog that</p> <p>4 we're unaware of.</p> <p>5 (Deposition Exhibit 6 was marked for</p> <p>6 identification.)</p> <p>7 BY MR. ROMAN:</p> <p>8 Q. Sergeant Baeppler, I've handed you</p> <p>9 what has been marked as Baeppler Exhibit 6, a</p> <p>10 two-page document bearing production number</p> <p>11 CLEVE 000267011 and 012.</p> <p>12 Have you seen this document before?</p> <p>13 A. They gave you this?</p> <p>14 Q. I gather you have.</p> <p>15 MS. DEBROSSE: Let me see.</p> <p>16 THE WITNESS: These are suspects in</p> <p>17 an -- in active investigations.</p> <p>18 MS. DEBROSSE: Sergeant, give me one</p> <p>19 moment.</p> <p>20 We're going to claw back this</p> <p>21 document. I think we -- under the legislative</p> <p>22 privilege, these are active and ongoing</p> <p>23 investigations. I believe Sergeant Baeppler</p> <p>24 has just testified that this is an ongoing</p> <p>25 investigation.</p>	<p style="text-align: right;">Page 101</p> <p>1 MS. DEBROSSE: Sure.</p> <p>2 (Deposition Exhibit 6 was amended.)</p> <p>3 BY MR. ROMAN:</p> <p>4 Q. Okay. So, Sergeant Baeppler,</p> <p>5 Exhibit 6 is now just a one-page document,</p> <p>6 CLEVE 000267011.</p> <p>7 Have you seen this document before,</p> <p>8 sir?</p> <p>9 A. Yes.</p> <p>10 Q. Okay. Exhibit 6 is an e-mail from</p> <p>11 Quinn Austin to you, with copies to others,</p> <p>12 dated April 30 of 2018, correct?</p> <p>13 A. Correct.</p> <p>14 Q. And you received this e-mail from</p> <p>15 Mr. Austin on or about that date in the</p> <p>16 ordinary course of business, correct?</p> <p>17 A. You are correct.</p> <p>18 Q. And the e-mail, as you can see,</p> <p>19 refers to a priority target list.</p> <p>20 Do you see that?</p> <p>21 A. Yes.</p> <p>22 Q. Okay. And that target list has been</p> <p>23 clawed back. And I understand that.</p> <p>24 My question is simply are you aware</p> <p>25 of any priority targets where those targets</p>



<p style="text-align: right;">Page 102</p> <p>1 were selling prescription opioids?</p> <p>2 MS. DEBROSSE: Subject to the</p> <p>3 legislative privilege, that you not disclose</p> <p>4 anything about any active investigations, you</p> <p>5 can generally answer that question, Sergeant.</p> <p>6 THE WITNESS: I'm unsure if any of</p> <p>7 them had to do with prescriptions. It's</p> <p>8 possible. I can't tell you for sure.</p> <p>9 BY MR. ROMAN:</p> <p>10 Q. Can you name any priority targets at</p> <p>11 any time -- well, strike that.</p> <p>12 What is a priority target?</p> <p>13 A. Priority targets are suspects that</p> <p>14 are involved with fatal overdoses or a large</p> <p>15 number of nonfatal overdoses.</p> <p>16 Q. And the reason they're priority is</p> <p>17 you want to get them off the street as quickly</p> <p>18 as possible?</p> <p>19 A. Yes, because they're killing people.</p> <p>20 Q. Okay. And are you aware of any</p> <p>21 priority target, in your time at -- in the</p> <p>22 police department, where that target was</p> <p>23 selling prescription opioids?</p> <p>24 A. I know of at least one that was</p> <p>25 selling prescription opioids, two actually.</p>	<p style="text-align: right;">Page 104</p> <p>1 We have ideas. That's it.</p> <p>2 Q. You anticipated my next question.</p> <p>3 What are your ideas as to how these</p> <p>4 two suspects got the Percocet?</p> <p>5 A. I can't tell you how because it's</p> <p>6 still in an active investigation and that could</p> <p>7 kind of give it away.</p> <p>8 Q. Well, let me ask do you know for a</p> <p>9 fact that these are not counterfeit Percocets</p> <p>10 that they're selling?</p> <p>11 A. I do not believe they're</p> <p>12 counterfeit. I believe they're -- I believe</p> <p>13 they're absolutely bona fide pills.</p> <p>14 Q. Can you disclose the basis for that</p> <p>15 belief or not?</p> <p>16 A. No.</p> <p>17 MS. DEBROSSE: Same instruction.</p> <p>18 BY MR. ROMAN:</p> <p>19 Q. Other than these two instances that</p> <p>20 have arisen in the last two or three months</p> <p>21 with respect the Percocets, can you identify</p> <p>22 any -- or not can you identify -- are you aware</p> <p>23 of any priority target of the Cleveland Police</p> <p>24 Department who has been selling prescription</p> <p>25 opioids?</p>
<p style="text-align: right;">Page 103</p> <p>1 But I can't give you their names.</p> <p>2 Q. I'm not asking for their names, sir.</p> <p>3 But when were these people priority</p> <p>4 targets?</p> <p>5 A. I'm not sure if they were priority</p> <p>6 targets for them. But they're priority targets</p> <p>7 for the Cleveland Police narcotics unit. And</p> <p>8 this would be in the past, oh, two, three</p> <p>9 months.</p> <p>10 Q. And what were they selling, or what</p> <p>11 are they selling?</p> <p>12 A. Percs, Percocets.</p> <p>13 Q. How did they come to your attention?</p> <p>14 A. CIs, confidential informants.</p> <p>15 Q. I'm glad you said that.</p> <p>16 So when you referred earlier to CIs,</p> <p>17 you were talking about confidential informants?</p> <p>18 A. Yes.</p> <p>19 Q. How did these two priority targets</p> <p>20 come to your attention?</p> <p>21 A. Obviously confidential informants</p> <p>22 tells us -- they tell us a lot of things. And</p> <p>23 they specifically told us about some pills that</p> <p>24 -- I can only assume where they got them or how</p> <p>25 they got them. They may have -- we don't know.</p>	<p style="text-align: right;">Page 105</p> <p>1 A. Other than those?</p> <p>2 Q. Right.</p> <p>3 A. Not that I know of.</p> <p>4 Q. And for how long has the Cleveland</p> <p>5 Police Department been keeping priority target</p> <p>6 lists?</p> <p>7 MS. DEBROSSE: Object to form.</p> <p>8 THE WITNESS: This is -- this</p> <p>9 meeting would be like the -- that was the start</p> <p>10 of what I knew to be target lists for this</p> <p>11 specific purpose of -- between the DEA and the</p> <p>12 HIDI task force.</p> <p>13 BY MR. ROMAN:</p> <p>14 Q. I understood.</p> <p>15 But was this -- was the list that</p> <p>16 was clawed back that was attached to the</p> <p>17 memorandum of --</p> <p>18 A. This?</p> <p>19 Q. -- April 30th of 2018, was that the</p> <p>20 first priority target lists, or were there</p> <p>21 other ones before that?</p> <p>22 A. The first one that I saw.</p> <p>23 Q. I think there's a reference in there</p> <p>24 to an updated priority target list.</p> <p>25 A. And --</p>

<p style="text-align: right;">Page 106</p> <p>1 Q. Do you see that?</p> <p>2 A. Yes. And I think the DEA may have</p> <p>3 had another list. But this is what I believe</p> <p>4 -- this was our first meeting where I saw the</p> <p>5 list. So if they had another one before that,</p> <p>6 I didn't know about it.</p> <p>7 Q. Have you seen priority target lists</p> <p>8 since this one?</p> <p>9 A. Yes.</p> <p>10 Q. How many of those have you seen?</p> <p>11 A. A half dozen or so.</p> <p>12 Q. They come out roughly once a month?</p> <p>13 A. I don't meet with them once a month.</p> <p>14 Whenever I meet with them. Like I say, a half</p> <p>15 dozen times maybe. But they come out every</p> <p>16 month; I don't see them every month.</p> <p>17 Q. How often do the names change from</p> <p>18 list to list?</p> <p>19 A. If they get arrested, they're taken</p> <p>20 off the list. Or if they're arrested, then</p> <p>21 they get out, then sometimes they get put back</p> <p>22 on the list.</p> <p>23 As long as they're active, and</p> <p>24 then -- you know, we believe that they're</p> <p>25 connected, they'll be on the list.</p>	<p style="text-align: right;">Page 108</p> <p>1 Q. You sent and received these e-mails</p> <p>2 on or about that date in the ordinary course of</p> <p>3 business, correct?</p> <p>4 A. Yes.</p> <p>5 Q. And Mr. Sekerak is the clinical</p> <p>6 quality care manager of the department of</p> <p>7 public safety in the division of the emergency</p> <p>8 medical service, correct?</p> <p>9 A. Yes.</p> <p>10 Q. I'd to direct your attention to</p> <p>11 your e-mail to Mr. Sekerak, which is the top</p> <p>12 e-mail.</p> <p>13 And the third sentence reads: "The</p> <p>14 info will greatly help us focus our efforts in</p> <p>15 the next phase of targeting the drug dealers</p> <p>16 involved in the fatal overdoses."</p> <p>17 Do you see that?</p> <p>18 A. Yes, I do.</p> <p>19 Q. What information -- strike that.</p> <p>20 To what information were you</p> <p>21 referring?</p> <p>22 A. The NARCAN list.</p> <p>23 Q. Okay. What is the NARCAN list?</p> <p>24 A. NARCAN list is the amount of NARCAN</p> <p>25 that EMS administered and the locations of</p>
<p style="text-align: right;">Page 107</p> <p>1 Q. With respect to the two priority</p> <p>2 targets who were selling these Percocets, can</p> <p>3 you say whether or not they're being</p> <p>4 investigated for illegal activity?</p> <p>5 A. Yes.</p> <p>6 Q. And they're suspected of committing</p> <p>7 crimes, correct?</p> <p>8 A. Yes. They're committing crimes.</p> <p>9 Q. So they're not lawfully selling</p> <p>10 Percocet.</p> <p>11 A. They are not lawfully selling</p> <p>12 Percocets. That's correct.</p> <p>13 (Deposition Exhibit 7 was marked for</p> <p>14 identification.)</p> <p>15 BY MR. ROMAN:</p> <p>16 Q. Sergeant -- I'm handing you what's</p> <p>17 been marked as Exhibit 7. It's a one-page</p> <p>18 document bearing production No. CLEVE</p> <p>19 000267678.</p> <p>20 Have you seen this document before?</p> <p>21 A. Yes.</p> <p>22 Q. Okay. Exhibit 7 is an e-mail chain</p> <p>23 between you and James Sekerak on February 26 of</p> <p>24 2018, correct?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 109</p> <p>1 where they're administered is very important us</p> <p>2 to, where the people are picked up at.</p> <p>3 Q. Now, in that -- in your e-mail you</p> <p>4 refer to the next phase of targeting the drug</p> <p>5 dealers.</p> <p>6 Do you see that?</p> <p>7 A. Yes.</p> <p>8 Q. To what -- what are the other</p> <p>9 phases?</p> <p>10 A. Well, this would be like a new phase</p> <p>11 because we didn't have it before. I mean that</p> <p>12 would be -- that is what I meant by that.</p> <p>13 Versus before were -- this is just one more</p> <p>14 resource that's really going to help us</p> <p>15 pinpoint. So that would be the next phase.</p> <p>16 So this is -- so we could see with</p> <p>17 the Exhibit 1 it talks about this meeting that</p> <p>18 I had. And this is what we were given because</p> <p>19 of that meeting. So I wanted to take it up</p> <p>20 another level and target the areas that are</p> <p>21 having the most problems.</p> <p>22 Q. This may seem like an obvious</p> <p>23 question, but it is, in fact, the drug dealers</p> <p>24 who are the primary causes of the fatal</p> <p>25 overdoses.</p>

<p style="text-align: right;">Page 110</p> <p>1 People are getting their -- the</p> <p>2 drugs that are causing the overdoses come from</p> <p>3 drug dealers and not from pharmacies, right?</p> <p>4 MS. DEBROSSE: Object to form.</p> <p>5 THE WITNESS: The drug dealers are</p> <p>6 the final nail in the coffin of these people's</p> <p>7 addiction. All right? I think this whole</p> <p>8 things starts somewhere else, but this is where</p> <p>9 it ends.</p> <p>10 Yes. The drug dealers are the ones</p> <p>11 that sell them fatal doses of drugs, I mean</p> <p>12 whether that's cocaine with fentanyl or heroin</p> <p>13 with fentanyl or whatever it is.</p> <p>14 BY MR. ROMAN:</p> <p>15 Q. Okay. But they're not always just</p> <p>16 the final nails in the coffin, right?</p> <p>17 Sometimes they're the first nails in</p> <p>18 the coffin, correct?</p> <p>19 A. What you mean by that? I would have</p> <p>20 to disagree. Because this isn't the first --</p> <p>21 most people this isn't their first rodeo with</p> <p>22 drugs. I mean this -- I mean that would be the</p> <p>23 final nail. The first and final -- if someone</p> <p>24 never did drugs before, and they did this</p> <p>25 heroin with heroin with fentanyl, that would be</p>	<p style="text-align: right;">Page 112</p> <p>1 identification.)</p> <p>2 Q. Sergeant Baeppler, I'm handing you</p> <p>3 what has been marked as Baeppler Exhibit 8.</p> <p>4 It's a one-page document bearing production No.</p> <p>5 CLEVE 001477582.</p> <p>6 Have you seen this document before?</p> <p>7 A. Yes.</p> <p>8 Q. Exhibit 8 is an e-mail dated March</p> <p>9 27, 2018, from you to the Ohio Tactical</p> <p>10 Officers Association, correct?</p> <p>11 A. Yes.</p> <p>12 Q. And you sent that e-mail on or about</p> <p>13 March 27 of 2018 in the ordinary course of</p> <p>14 business, correct?</p> <p>15 A. Yes.</p> <p>16 Q. In the e-mail you write -- and</p> <p>17 actually at the -- strike that.</p> <p>18 The person at the Ohio Tactical</p> <p>19 Officers Association to whom you were writing</p> <p>20 was Patrick Fiorilli, correct?</p> <p>21 A. That's correct.</p> <p>22 Q. And you write: "Pat, as far as the</p> <p>23 narcotics guys go, Klamert, Moran and I are</p> <p>24 planning on attending and spending a night at</p> <p>25 the park. I would prefer we go at the</p>
<p style="text-align: right;">Page 111</p> <p>1 the final nail. That's my interpretation of</p> <p>2 it.</p> <p>3 Q. Well, what I was -- actually, I was</p> <p>4 asking a slightly different question. And</p> <p>5 forgive me if I confused you.</p> <p>6 What I was saying is that sometimes</p> <p>7 people -- you testified earlier that sometimes</p> <p>8 people start because they have an athletic</p> <p>9 injury, they get hooked on whatever</p> <p>10 prescription drug it is, and eventually they</p> <p>11 end up with heroin.</p> <p>12 A. Yes.</p> <p>13 Q. But some people start off just</p> <p>14 because a drug dealer convinces them to take an</p> <p>15 illegal drug, correct?</p> <p>16 A. In my experience, it rarely happens</p> <p>17 where a drug dealer walks up to a person, say,</p> <p>18 "Here. Take this drug," and then all of a</p> <p>19 sudden they -- that's not how things start off.</p> <p>20 Q. Or the friend who has bought drugs</p> <p>21 from a drug dealer gives it to the friend,</p> <p>22 says, "Hey, you'll love this. It'll make you</p> <p>23 feel great."</p> <p>24 A. I'm sure that happens sometimes.</p> <p>25 (Deposition Exhibit 8 was marked for</p>	<p style="text-align: right;">Page 113</p> <p>1 beginning of the presentation. I was also</p> <p>2 going to talk about the new trends and how we</p> <p>3 are finding half of our cocaine overdoses also</p> <p>4 contain fentanyl and the influx of counterfeit</p> <p>5 pills containing the fentanyl. This should be</p> <p>6 followed by the prosecutors and then the</p> <p>7 intelligence aspect with the analysts. We are</p> <p>8 excited to be a part of this event. Let me</p> <p>9 know if there's anything else you need."</p> <p>10 Do you see that?</p> <p>11 A. Yes.</p> <p>12 Q. First of all, so Sergeant Moran is</p> <p>13 with -- or Detective Moran is with the</p> <p>14 Cleveland police department, correct?</p> <p>15 A. Yes, he is.</p> <p>16 Q. And is Mr. Klamert also a detective</p> <p>17 in the Cleveland Police Department?</p> <p>18 A. Yes, he is.</p> <p>19 Q. What division is he in?</p> <p>20 A. He is part of the HIDI team.</p> <p>21 Q. As is Detective Moran?</p> <p>22 A. Yes.</p> <p>23 Q. Okay. Direct your attention to the</p> <p>24 third sentence about the new trends.</p> <p>25 Do you see that?</p>

<p style="text-align: right;">Page 114</p> <p>1 A. Yes.</p> <p>2 Q. And it was, in fact, the case that,</p> <p>3 as of spring of 2018, half of the cocaine</p> <p>4 overdoses that the Cleveland Police Department</p> <p>5 was finding were also containing -- that the</p> <p>6 drugs in the person's system also contained</p> <p>7 fentanyl, correct?</p> <p>8 A. That's correct.</p> <p>9 Q. And again, as we discussed earlier,</p> <p>10 those people taking the cocaine may never know</p> <p>11 that they were also take fentanyl, correct?</p> <p>12 A. That's correct.</p> <p>13 Q. Now, you also refer to the influx of</p> <p>14 counterfeit pills.</p> <p>15 Do you see that?</p> <p>16 A. Yes.</p> <p>17 Q. Those pills are made using fentanyl,</p> <p>18 correct?</p> <p>19 A. There's fentanyl in them, yes. It</p> <p>20 would be -- my experience, we've seen Percocets</p> <p>21 and OxyContin -- they -- they look like</p> <p>22 Percocets or OxyContin, but they actually</p> <p>23 contain fentanyl and other binders.</p> <p>24 Q. And did you say when you started</p> <p>25 seeing the counterfeit pills?</p>	<p style="text-align: right;">Page 116</p> <p>1 offhand. I mean there's lots of ideas, but...</p> <p>2 (Deposition Exhibit 9 was marked for</p> <p>3 identification.)</p> <p>4 BY MR. ROMAN:</p> <p>5 Q. Sergeant Baeppler, I'm handing you</p> <p>6 what has been marked Baeppler Exhibit 9. It is</p> <p>7 a two-page document bearing production Nos.</p> <p>8 CLEVE 002257384 and 385.</p> <p>9 Have you seen this document before?</p> <p>10 A. I'm sure I saw it. I don't recall,</p> <p>11 but I see it now, and I see my name is on it.</p> <p>12 Q. Okay. So this is an -- Exhibit 9 is</p> <p>13 an e-mail exchange from March 20, 2018,</p> <p>14 correct?</p> <p>15 A. Yes.</p> <p>16 Q. And the top e-mail, the most recent</p> <p>17 one, is an e-mail from Jennifer Gedeon?</p> <p>18 A. Yes.</p> <p>19 Q. To a whole bunch of folks including</p> <p>20 you, correct?</p> <p>21 A. Yes.</p> <p>22 Q. And do you have any reason to</p> <p>23 believe that you did not receive this e-mail</p> <p>24 from Ms. Gedeon or about March 20, 2018, in the</p> <p>25 ordinary course of business?</p>
<p style="text-align: right;">Page 115</p> <p>1 I think you testified earlier about</p> <p>2 that. You said in the last year you --</p> <p>3 A. I've seen a lot in the last year, so</p> <p>4 yes. More than -- you know, I knew that</p> <p>5 they've been around before. Because they've</p> <p>6 had pill presses and so forth. But we haven't</p> <p>7 seen them in the numbers that we have recently.</p> <p>8 Q. Do you know who's making them?</p> <p>9 A. I have some ideas.</p> <p>10 Q. What those the ideas?</p> <p>11 A. I think the Mexican cartel is</p> <p>12 producing them in mass. And I think they're</p> <p>13 also being produced locally.</p> <p>14 Q. Who is producing them locally?</p> <p>15 A. Drug dealers locally. Local drug</p> <p>16 dealers.</p> <p>17 Q. And do you know why there would be</p> <p>18 an influx of counterfeit pills?</p> <p>19 Is it because there are fewer</p> <p>20 prescription pills out in the streets now, or</p> <p>21 what's your theory?</p> <p>22 A. Frankly, I -- I don't know why</p> <p>23 they're being produced like that. I can't</p> <p>24 answer that. I mean I know that they're out</p> <p>25 there. I can't really say why. Not off -- not</p>	<p style="text-align: right;">Page 117</p> <p>1 A. I have no reason to believe I did</p> <p>2 not receive it.</p> <p>3 Q. Thank you for fixing the bad</p> <p>4 question.</p> <p>5 So going to the bottom e-mail, the</p> <p>6 -- the -- see there's a reference to -- it</p> <p>7 says: "The attached FBI SIR pertains to</p> <p>8 fentanyl being disguised as oxycodone</p> <p>9 hydrochloride pills."</p> <p>10 Do you see that?</p> <p>11 A. Yes.</p> <p>12 Q. What is an FBI SIR?</p> <p>13 A. I don't know.</p> <p>14 Q. Are you familiar with fentanyl being</p> <p>15 disguised as oxycodone hydrochloride pills?</p> <p>16 A. Yes, I do. Or I'm familiar.</p> <p>17 In thinking further on your question</p> <p>18 as to why they're doing pills, it's probably</p> <p>19 because -- twofold. That normally people think</p> <p>20 that pills are pharmaceutical grade; they're</p> <p>21 pure and can be trusted. And so that's why</p> <p>22 people may like them, for that reason alone.</p> <p>23 Or it's just another way to disguise</p> <p>24 a drug. So if a police officer would pull them</p> <p>25 over, the police officer would think it's just</p>

<p style="text-align: right;">Page 118</p> <p>1 a prescription pill and nothing more, nothing 2 less, which may be totally legal to have, 3 versus a fentanyl pill is not. 4 Q. But why would that just have started 5 in -- or really started to get going in the 6 last year or so? 7 A. I couldn't tell you. It's a new 8 trend. That's what we're seeing. 9 Q. How do you identify the counterfeit 10 pill? How do you determine it's counterfeit? 11 A. It has to be tested in the lab. 12 Sometimes I can look at a pill; I could tell 13 it's counterfeit just because of the way it's 14 made. Sometimes, if you break it open, it's 15 like white on the inside -- or it's -- the 16 color would be the same throughout, versus a 17 authentic pill would be white on the inside and 18 blue on the outside or something along those 19 lines. 20 Or the imprint is not crisp. It 21 doesn't -- you know, it's -- and the whole 22 process on how they press pills is they 23 literally press them. And sometimes it's not a 24 -- you know, they got a substandard press. 25 Some of them are really good. Some</p>	<p style="text-align: right;">Page 120</p> <p>1 Q. Okay. As you can see, this is a 2 document entitled "Narcotics Realignment," and 3 the date is November 25 of 2012, correct? 4 A. Yes. 5 Q. Are you familiar what was -- what 6 realignment was being done within the narcotics 7 unit in November of 2012? 8 A. Yes. 9 Q. What was that -- what was the nature 10 of that realignment? 11 A. Like I would be doing interdiction 12 versus my other -- so I went -- basically from 13 there I went directly from working hand in hand 14 with the gang unit, and then we'd do 15 interdiction, which I would do -- would mean I 16 would spend lots of time that FedEx and mail 17 terminals. And we'd be looking for packages 18 coming through containing drugs and/or money. 19 Q. How could you tell that? 20 A. How could I tell what? 21 Q. What packages contained drugs or 22 money. 23 A. A number of factors. The size of 24 the package, the way it's packaged, the 25 addresses, the names on the addresses. I mean</p>
<p style="text-align: right;">Page 119</p> <p>1 of the pills look really good, and you can't 2 tell the difference if they're side by side 3 with an authentic pill. 4 Q. And when they're really good, the 5 people using them don't know they're taking 6 fentanyl, correct? 7 A. Sometimes they do. I don't know. I 8 -- you know what? I'm sure some people do, and 9 some people don't. That's my experience. 10 (Deposition Exhibit 10 was marked 11 for identification.) 12 BY MR. ROMAN: 13 Q. Sergeant Baeppler, I'm handing you 14 what has been marked as Baeppler Exhibit 10. 15 It's a three-page document. My copy doesn't 16 have Bates numbers on it. 17 Can I get that back from you so I 18 can put that on the record? Thank you. 19 It's CLEVE 000011161 through 63. 20 Have you seen this document before? 21 A. I don't remember seeing it, but I -- 22 I'm reading it now. I could have seen it at 23 some point in time. 24 Q. Have you had a chance to review it? 25 A. Yes.</p>	<p style="text-align: right;">Page 121</p> <p>1 there's a number of factors. 2 And when everything adds up, then 3 you have a drug dog sniff the package. And if 4 the dog hits on it, then you get a search 5 warrant, open up the package, see if there's 6 drugs in there. Every time that I've known 7 there's been drugs in there then. 8 And then, you know, we would attempt 9 to deliver the package. 10 Q. Now, this is a bit of a detour here, 11 but sometimes you got money from this? 12 You would -- you would get packages 13 of money? 14 A. On the outbound. That would be 15 you're looking for something else. So in 16 Cleveland how it works is we're a destination 17 drug point. Drugs aren't produced here, 18 especially not marijuana. And that's what most 19 of this is coming -- you know, you have a lot 20 of marijuana, cocaine and heroin getting 21 delivered through the mail. 22 And so it's delivered from other 23 areas, sent here. And then people have to get 24 their money back another way. You can do it 25 with crypto currency, or they'll send cash, or</p>



<p style="text-align: right;">Page 122</p> <p>1 they will literally put it on themselves and</p> <p>2 fly back with the money. Because it's --</p> <p>3 money's not illegal.</p> <p>4 And so people -- you know, some</p> <p>5 people would prefer to send it in the mail.</p> <p>6 And so you'd look for it, and you look for</p> <p>7 certain characteristics from like emanating</p> <p>8 address to the end address, and see if the</p> <p>9 names match up.</p> <p>10 Q. Do you have a sense of how much cash</p> <p>11 the police department has seized from illegal</p> <p>12 drug buys?</p> <p>13 MS. DEBROSSE: Object to form.</p> <p>14 Go ahead.</p> <p>15 THE WITNESS: I don't know. I don't</p> <p>16 -- do you know why I don't know? Because I</p> <p>17 don't count the money. Like I don't count the</p> <p>18 money like that. I don't keep track of how</p> <p>19 much money we get. That's irrelevant to me.</p> <p>20 I don't -- I don't do my job from --</p> <p>21 to see how much money I can take from people.</p> <p>22 So I don't keep track of it.</p> <p>23 BY MR. ROMAN:</p> <p>24 Q. But do you know what happens to the</p> <p>25 money that's seized?</p>	<p style="text-align: right;">Page 124</p> <p>1 Q. Was the focus of the unit on all</p> <p>2 drugs, or were there certain drugs on which you</p> <p>3 were particularly focused?</p> <p>4 A. All drugs.</p> <p>5 Q. What did you primarily find?</p> <p>6 You said marijuana.</p> <p>7 A. Marijuana, cocaine, heroin.</p> <p>8 Q. Did you see the heading N-O-L-E-T-F</p> <p>9 on the first page?</p> <p>10 A. Yes.</p> <p>11 Q. And that stands for Northern Ohio</p> <p>12 Law Enforcement Task Force, correct?</p> <p>13 A. Yes.</p> <p>14 Q. And the Cleveland Police Department</p> <p>15 is a participant in that task force, correct?</p> <p>16 A. Yes.</p> <p>17 Q. And that task force is aimed at</p> <p>18 dismantling drug organizations, correct?</p> <p>19 A. Correct.</p> <p>20 Q. If you look under the section, it</p> <p>21 appears that the seizures were principally of</p> <p>22 marijuana and heroin, correct?</p> <p>23 A. On -- at the first page, correct?</p> <p>24 Q. Yes.</p> <p>25 A. Primarily, yes. I think there was</p>
<p style="text-align: right;">Page 123</p> <p>1 A. I wish I did.</p> <p>2 Q. Do you know if it goes to pay off --</p> <p>3 pay for police department operations or...</p> <p>4 MS. DEBROSSE: Object to form.</p> <p>5 THE WITNESS: I don't know where it</p> <p>6 goes.</p> <p>7 BY MR. ROMAN:</p> <p>8 Q. So going back to Exhibit 10, there's</p> <p>9 a reference in there to, as you know,</p> <p>10 interdiction.</p> <p>11 Was there an interdiction unit?</p> <p>12 A. Yes. That would be -- I was with</p> <p>13 Lieutenant Purcell, myself, Detective Cuadra,</p> <p>14 Tommy Hall, Frank Lake, Pat Andrejeak.</p> <p>15 Q. Do you know when it started and why?</p> <p>16 A. It was just a realignment. Kind of</p> <p>17 went with the flow. And, you know, I was</p> <p>18 getting promoted to sergeant at the time. I</p> <p>19 was just waiting.</p> <p>20 Q. Do you know why they started the</p> <p>21 interdiction unit in 2012 and why not sooner or</p> <p>22 why not later?</p> <p>23 MS. DEBROSSE: Object to form.</p> <p>24 THE WITNESS: I don't know.</p> <p>25 BY MR. ROMAN:</p>	<p style="text-align: right;">Page 125</p> <p>1 also some ecstasy in there, but -- as well as</p> <p>2 some heroin. But I don't see it on here. It</p> <p>3 wouldn't be nearly as much as the cocaine or</p> <p>4 marijuana though.</p> <p>5 Q. Do you know if they ever seized any</p> <p>6 prescription opioids?</p> <p>7 A. I don't recall. It's possible.</p> <p>8 Q. Go, please, to the bottom of the</p> <p>9 second page, the very last sentence. It says:</p> <p>10 "Due to recent trends in pharmaceutical drug</p> <p>11 abuse, the compliance unit frequently handles</p> <p>12 pill cases that lead to heroin traffickers."</p> <p>13 Do you see that?</p> <p>14 A. Yes.</p> <p>15 Q. How did the -- or how does the</p> <p>16 compliance unit investigate pill cases that</p> <p>17 lead to heroin traffickers?</p> <p>18 A. They're both opiates. And so they</p> <p>19 kind of go hand in hand. Typically, in my</p> <p>20 experience, people that are addicted to opiate</p> <p>21 pills -- or I'm sorry -- opioid pills, they</p> <p>22 generally go to heroin eventually. They don't</p> <p>23 -- I mean, it's -- it's rare for someone to</p> <p>24 just stay on pills. It starts with the pills</p> <p>25 and ends with heroin, in my experience. Unless</p>



<p style="text-align: right;">Page 126</p> <p>1 you're very rich and can afford pills all the 2 time. 3 Q. Do you know if that's the experience 4 of other police -- Cleveland police department 5 detectives? 6 A. I would imagine so. I can't speak 7 for anyone else though. 8 Q. So you don't know one way or the 9 other? 10 MS. DEBROSSE: Object to form. 11 THE WITNESS: I answered I can't -- 12 I can't speak for anyone else but myself. 13 That's my experience. I would imagine that 14 would be the same as others. 15 BY MR. ROMAN: 16 Q. Do you -- do you know to what the 17 reference was "recent trends in pharmaceutical 18 drug abuse"? 19 A. I don't recall at that point in 20 time. 21 Q. Do you know what kinds of pill cases 22 the compliance unit was handling? 23 A. I believe Percocets, Vicodin. 24 Q. And what's the basis for that? 25 A. That's what I bought. Or I</p>	<p style="text-align: right;">Page 128</p> <p>1 A. I don't know. 2 Q. Do you know what drugs were 3 considered opioids for purposes of inclusion in 4 this chart? 5 A. I would imagine all opioids. 6 Q. Both prescription and 7 nonprescription? 8 A. I don't know. All right? I can 9 only assume. And, you know, that's not 10 accurate. It'd be just assuming. 11 So I wasn't privy to how they 12 collected their data before through all these 13 other years. Because I was in the gang unit. 14 So I don't want to answer one way or 15 the other because I really -- I want to be as 16 honest and truthful with you on this. So I 17 can't give you a definitive answer. 18 Q. Do you know why data wasn't 19 available before 2013 and, in the case of 20 nonfatals, before 2014? 21 MS. DEBROSSE: Object to form. 22 THE WITNESS: I don't know. 23 BY MR. ROMAN: 24 Q. Do you know what qualifies as an 25 overdose? How do you make that determination?</p>
<p style="text-align: right;">Page 127</p> <p>1 shouldn't say that's what I bought. That's 2 what I got prescriptions for. 3 (Deposition Exhibit 11 was marked 4 for identification.) 5 BY MR. ROMAN: 6 Q. Sergeant Baeppler, I'm handing you 7 what has been marked as Exhibit 11, a one-page 8 document bearing production No. CLEVE 9 000251552. 10 Have you seen this document before? 11 A. I don't believe so. 12 Q. Do you recognize it as statistics 13 maintained by the Cleveland Police Department 14 bureau of special service of nonfat and fatal 15 opioid overdoses from -- at least in part from 16 2013 to 2017? 17 A. Yes. 18 Q. And can you please go back to 19 Exhibit 3. 20 Do you have that in front of you? 21 A. Yes, I do. 22 Q. Do you know if this is the 23 attachments were the subject of exhibit -- do 24 you know whether Exhibit 11 was either attached 25 to or the subject of Exhibit 3?</p>	<p style="text-align: right;">Page 129</p> <p>1 I know if it's a fatal over -- well, 2 actually I shouldn't even say that. Strike 3 that. 4 How does Cleveland Police Department 5 determine that there's an overdose involved? 6 A. A couple of different things. One, 7 the police get there or if EMS gets there, EMS 8 will call if they believe it to be an overdose 9 for whatever reason. If the person is foaming 10 at the mouth, they're falling out. If NARCAN 11 is given and it's effective, that would be a 12 good way to tell. 13 Personally, when I get calls from 14 radio and they say the person is overdosing, I 15 ask if they were given NARCAN. And if they say 16 no, then to me that is not an overdose because 17 they didn't need anything to come out. They 18 weren't -- you know, that's -- it's just the 19 way it is. Of course, we have a lot of other 20 ones we have to respond to that are confirmed 21 overdoses. So that would be one. 22 The other, fatal overdose, per se, 23 there's usually some kind of evidence on scene, 24 or the conditions don't seem right if they were 25 cleaned up.</p>

<p style="text-align: right;">Page 130</p> <p>1 There's certain things we look for, 2 foaming at the mouth. It doesn't necessarily 3 mean it's a fatal overdose, but that's the 4 easiest sign that it could very well be. 5 There's a syringe sticking out of 6 their arm, called a clue. You know, a baggy 7 with a powder in it or whatever else. Anything 8 that we believe that, you know, drugs could be 9 the cause of the overdose. 10 Q. Now, if you look at these 11 statistics, it appears that 2016 was the peak 12 year for overdoses. 13 Do you see that? 14 A. Not really. Because 2017 was at 15 164, and there's still five months to go. So 16 2017 would have been the peak year. 17 Because -- you know, you see where 18 I'm coming from. 19 Q. Yes. 20 A. Because you're missing five months. 21 Q. Okay. Do you have an understanding 22 as to why 2016, 2017 were higher than 2015, for 23 example? 24 A. No, I don't know. 25 (Deposition Exhibit 12 was marked</p>	<p style="text-align: right;">Page 132</p> <p>1 below suspect? Is that what a person of 2 interest is? 3 A. They could be a suspect. 4 Q. Okay. And in the notes section, is 5 that where the detective responding to the call 6 would record the evidence that was found at the 7 scene? 8 A. Yes. They would see if they 9 collected any evidence or not. 10 Q. Did they also indicate the types of 11 drugs found at the scene? 12 A. Sometimes they do; sometimes they 13 don't. It depends on who the detective is. 14 Q. So where it says just "Evidence 15 Collected," you don't know what evidence has 16 been collected? 17 A. Not from this. 18 Q. Where would you go find that 19 information? 20 A. I would imagine the report. 21 Q. The police report? 22 A. Yes. It would be in the record 23 management system. Because they have to -- 24 they'd have to enter it as evidence. 25 MR. ROMAN: Okay.</p>
<p style="text-align: right;">Page 131</p> <p>1 for identification.) 2 BY MR. ROMAN: 3 Q. Sergeant Baeppler, I'm handing you 4 what has been marked as Baeppler Exhibit 12, a 5 multipage document bearing production Nos. 6 CLEVE 001476069 through 80. 7 Have you seen this document before? 8 A. No. 9 Q. Are you familiar with this document? 10 Have you seen documents like this 11 one? 12 A. Yes. I mean I've never seen this 13 before, but I have an idea what this is. 14 Q. Okay. But what is Exhibit 33 -- I'm 15 sorry -- Exhibit 12? 16 A. I believe these are results of 17 heroin overdoses that we went to and some of 18 the notes therefrom. 19 Q. Well, let's focus on those notes 20 section. 21 Do you know what -- it says "Notes, 22 POI." 23 Do you know what "POI" stands for? 24 A. Persons of interest. 25 Q. So those -- is that kind of a level</p>	<p style="text-align: right;">Page 133</p> <p>1 (Deposition Exhibit 13 was marked 2 for identification.) 3 BY MR. ROMAN: 4 Q. Sergeant Baeppler, I'm handing you 5 what has been marked as Baeppler 13, multipage 6 document bearing production Nos. CLEVE 7 001476081 through 92. 8 Have you seen this document before? 9 A. No. But I know what it is. 10 Q. This is the same document as the 11 previous one except for the next year, correct, 12 2018? 13 A. Yes. 14 Q. Everything else about it is the same 15 in terms of type of document and types of 16 information collected? 17 A. Yes. 18 Q. Is it your belief, 19 Sergeant Baeppler, that heroin deaths in 20 Cleveland are on the decline? 21 A. It seems to be, yes. 22 Q. When did that decline start? 23 A. This year -- or 2018. 24 Q. Do you recall when in 2018? 25 A. No.</p>

<p style="text-align: right;">Page 134</p> <p>1 Q. Do you have an understanding as to</p> <p>2 why heroin deaths are on the decline in</p> <p>3 Cleveland?</p> <p>4 A. My thoughts are that there's NARCAN</p> <p>5 more readily available. And so the -- so</p> <p>6 people are overdosing, but they're not</p> <p>7 reporting it because they're saving themselves</p> <p>8 or their friends are saving them. That's my</p> <p>9 belief at least, my idea.</p> <p>10 Q. Do you know whether heroin use is</p> <p>11 down?</p> <p>12 A. I don't think it's down.</p> <p>13 (Deposition Exhibit 14 was marked</p> <p>14 for identification.)</p> <p>15 BY MR. ROMAN:</p> <p>16 Q. Sergeant Baeppler, I'm handing you</p> <p>17 what has been marked as Exhibit 14. It's a</p> <p>18 one-page document bearing production No. CLEVE</p> <p>19 000182046.</p> <p>20 Have you seen this document before?</p> <p>21 A. I'm sure I read it. I don't recall</p> <p>22 specifically if I've seen this one. But I'm</p> <p>23 sure on the list. I'm sure I received the</p> <p>24 e-mail.</p> <p>25 Q. So Exhibit 14 is an e-mail from Hugh</p>	<p style="text-align: right;">Page 136</p> <p>1 Nonfentanyl-related heroin deaths were at</p> <p>2 lowest levels in a decade."</p> <p>3 Do you see that?</p> <p>4 A. Yes.</p> <p>5 Q. Is that consistent with your</p> <p>6 experience and understanding?</p> <p>7 A. Yes. And it would -- yeah. It</p> <p>8 would go with my theory that the heroin addicts</p> <p>9 or the people -- the persons addicted to heroin</p> <p>10 are -- there's a thing called Project DAWN</p> <p>11 where they give away NARCAN on a regular basis.</p> <p>12 And virtually every home that we go</p> <p>13 into has NARCAN in it. Family members carry</p> <p>14 NARCAN if they have a family member that's an</p> <p>15 addicted person.</p> <p>16 That's what I believe is the reason</p> <p>17 for this. Why they're not -- you're not seeing</p> <p>18 all these fatals go to overdoses with heroin is</p> <p>19 because of that. And when the fentanyl is</p> <p>20 mixed with cocaine, they're not exactly</p> <p>21 expecting that.</p> <p>22 Q. And I think you testified earlier</p> <p>23 that you thought that the heroin deaths went</p> <p>24 down in the last year. This suggests that they</p> <p>25 actually went down in 2017.</p>
<p style="text-align: right;">Page 135</p> <p>1 Shannon to a whole bunch of folks, on which</p> <p>2 even more folks are copied, including you,</p> <p>3 correct?</p> <p>4 A. Yes.</p> <p>5 Q. And you received this e-mail on or</p> <p>6 about January 5th, 2018, in the ordinary course</p> <p>7 of business, correct?</p> <p>8 A. Yes.</p> <p>9 Q. Mr. Shannon is an administrator with</p> <p>10 the Cuyahoga County medical examiner's officer,</p> <p>11 correct?</p> <p>12 A. Yes.</p> <p>13 Q. Directing your attention to the</p> <p>14 second paragraph of Mr. Shannon's e-mail, he</p> <p>15 says: "December" -- and this is December of</p> <p>16 2017, correct?</p> <p>17 A. Yes.</p> <p>18 Q. -- "ended rather quietly with a</p> <p>19 number of fentanyl cases, nearly all mixed with</p> <p>20 either cocaine, heroin or both. Overall" --</p> <p>21 this is now the next paragraph.</p> <p>22 "Overall, 2017 ended higher than</p> <p>23 2016, not surprisingly. Cocaine was prolific.</p> <p>24 Heroin began to disappear. Even mixed with</p> <p>25 fentanyl, the numbers were lower than 2016.</p>	<p style="text-align: right;">Page 137</p> <p>1 Does that strike you as inconsistent</p> <p>2 in any way or just a matter of degree?</p> <p>3 MS. DEBROSSE: Object to form.</p> <p>4 You may answer, Sergeant.</p> <p>5 THE WITNESS: Excuse me?</p> <p>6 MS. DEBROSSE: You may answer.</p> <p>7 THE WITNESS: As I said, I consider</p> <p>8 that the whole thing with the fentanyl and the</p> <p>9 heroin was one in the same, you know, with the</p> <p>10 -- when people just take strictly fentanyl -- I</p> <p>11 mean they may think it's -- they may think it's</p> <p>12 heroin, but it's actually fentanyl.</p> <p>13 MR. ROMAN: I'll do one more</p> <p>14 document, and then we'll break for what I hope</p> <p>15 is lunch. Hope it's here.</p> <p>16 Is that okay with you to do one more</p> <p>17 document?</p> <p>18 THE WITNESS: That'd be great.</p> <p>19 MR. ROMAN: I can do more, if you</p> <p>20 like.</p> <p>21 THE WITNESS: No.</p> <p>22 (Deposition Exhibit 15 was marked</p> <p>23 for identification.)</p> <p>24 BY MR. ROMAN:</p> <p>25 Q. Sergeant Baeppler, I'm handing you</p>

<p style="text-align: right;">Page 138</p> <p>1 what has been marked as Baeppler Exhibit 15, a</p> <p>2 one-page document bearing production No. CLEVE</p> <p>3 000247906.</p> <p>4 Have you seen this document before?</p> <p>5 A. I don't recall it. I'm reading it</p> <p>6 now.</p> <p>7 Okay.</p> <p>8 Q. Have you had an opportunity to</p> <p>9 review Exhibit 15?</p> <p>10 A. Yes.</p> <p>11 Q. Have you seen this before -- this</p> <p>12 document before?</p> <p>13 A. No, I have not. Not that I recall.</p> <p>14 I do not recall any of this. I recall -- I</p> <p>15 think I know what meeting they're talking</p> <p>16 about, but I did not see this document.</p> <p>17 Q. Okay. Let's go back a second.</p> <p>18 This is an e-mail from M. Gordon at</p> <p>19 the Cleveland Department of Public Health,</p> <p>20 correct?</p> <p>21 A. Yes.</p> <p>22 Q. And it's dated March 6th of 2018,</p> <p>23 correct?</p> <p>24 A. Yes.</p> <p>25 Q. Do you know who Mr. or Ms. Gordon</p>	<p style="text-align: right;">Page 140</p> <p>1 meeting?</p> <p>2 A. Basically to talk about the</p> <p>3 detectives, you know, being able to interview</p> <p>4 people that come into the emergency room.</p> <p>5 Q. Who else was there besides you?</p> <p>6 A. My commander and --</p> <p>7 Q. Who is your commander?</p> <p>8 A. Commander Gingell, Deposition Chief</p> <p>9 Harry Bertel. And I don't remember the other</p> <p>10 people there.</p> <p>11 Q. Mr. or Ms. Gordon was there.</p> <p>12 A. Yes.</p> <p>13 Q. And then didn't we see Mr. Shannon</p> <p>14 earlier, in an earlier document?</p> <p>15 MS. DEBROSSE: Object to form.</p> <p>16 THE WITNESS: Yeah, we did. I don't</p> <p>17 recall if he was there or not. He was probably</p> <p>18 was, but I don't specifically recall him.</p> <p>19 BY MR. ROMAN:</p> <p>20 Q. Did you speak at this meeting?</p> <p>21 A. I don't think I said a word at this</p> <p>22 meeting, other than my name.</p> <p>23 Q. Directing your attention to the</p> <p>24 first sentence of the text, where it says:</p> <p>25 "Overdoses - both death and nonfatal continue</p>
<p style="text-align: right;">Page 139</p> <p>1 is?</p> <p>2 A. I just know the name Merrill Gordon.</p> <p>3 Q. I --</p> <p>4 A. Yeah. I believe they were at the</p> <p>5 meeting.</p> <p>6 Q. I'm sorry. Who's -- what was the</p> <p>7 name?</p> <p>8 A. Merrill Gordon.</p> <p>9 Q. Is that a man or a woman?</p> <p>10 A. I don't recall, honestly. I've only</p> <p>11 met them one time. And there was several --</p> <p>12 there was more than this at the meeting. There</p> <p>13 was some doctors there too.</p> <p>14 Q. Do you recall that -- well, first of</p> <p>15 all, this memo recaps a meeting on March 6 of</p> <p>16 2018, correct?</p> <p>17 A. I don't know if the meeting was on</p> <p>18 -- yes. It would have to be on the 6th, yes.</p> <p>19 Because that's what they're talking -- a recap</p> <p>20 of the meeting.</p> <p>21 Q. Where was this meeting held?</p> <p>22 A. It was held at Metro Hospital.</p> <p>23 Q. And you attended this meeting?</p> <p>24 A. Yes.</p> <p>25 Q. And what was the purpose of the</p>	<p style="text-align: right;">Page 141</p> <p>1 to grow at an unprecedented and unrelenting</p> <p>2 rate, overwhelming all our resources."</p> <p>3 Was that, in fact, the case in March</p> <p>4 2018, that overdoses in Cleveland were</p> <p>5 continuing to grow at an unprecedented and</p> <p>6 unrelenting rate?</p> <p>7 A. Maybe by what she was looking at.</p> <p>8 I'm not sure what she was basing that on -- or</p> <p>9 he or she was basing that on.</p> <p>10 Q. Was that your experience in</p> <p>11 Cleveland or not?</p> <p>12 A. All I knew was that there was a lot</p> <p>13 of them.</p> <p>14 And to go back, I don't track</p> <p>15 every -- on a week-by-week or every month to</p> <p>16 see, hey, are we above or below or anything</p> <p>17 else like that. Because I'm more concerned</p> <p>18 with completing the cases that we have and</p> <p>19 trying to track down the drug dealers.</p> <p>20 So every six months I may look and</p> <p>21 see what the latest trends are in terms of</p> <p>22 total numbers. But I'm more concerned with</p> <p>23 specific areas and where they are occurring.</p> <p>24 Q. Well, --</p> <p>25 A. So -- so my -- you're asking me what</p>

<p style="text-align: right;">Page 142</p> <p>1 her experience is, my experience is. I know  2 that you're going to point to this -- you know,  3 the numbers being down, but that's not what I  4 was looking at.  5 And the other factor, I don't know  6 if she was counting -- I'm sure that the  7 hospitals received overdoses that we don't get  8 notified of. They may have a separate number  9 that I don't know about. I don't know.  10 Q. Well, it was your experience, wasn't  11 it, that the fatalities were going down by 2017,  12 2018, wasn't it?  13 A. My experience is that there were a  14 lot of them. I don't want to quantify -- I  15 can't quantify like that other than we were  16 still busy.  17 MR. ROMAN: Okay. Why don't we take  18 a lunch break.  19 THE WITNESS: Thank you.  20 (A short recess was taken.)  21 BY MR. ROMAN:  22 Q. Sergeant Baeppler, this morning we  23 touched on pharmaceutical drug diversion.  24 Do you recall that?  25 A. Yes.</p>	<p style="text-align: right;">Page 144</p> <p>1 no.  2 Q. You said you were familiar with a  3 couple of the ways a diversion occurs.  4 What are those ways?  5 A. Well, my understanding, if they have  6 a doctor that they believe is prescribing a lot  7 of pills, then, you know -- or -- shouldn't say  8 pills -- but prescriptions, then they will look  9 into them.  10 And a lot of times -- I mean the few  11 cases I know of him, he's had people on the  12 inside feeding him information. So maybe a  13 nurse that works in the office will say, "Hey,  14 there's something going on here," or something  15 along those lines.  16 Or a pharmaceutical company, someone  17 that -- one of the employees will say  18 something. Or the pharmacy itself will say,  19 "Hey, we have a problem with one of our  20 employees. We're not sure what's going on."  21 Something along those lines.  22 The other thing is I know for a fact  23 that he's gotten calls from pharmacists saying,  24 "Hey, we got this prescription here, and it  25 looks a little funky." And it will the go</p>
<p style="text-align: right;">Page 143</p> <p>1 Q. What are the ways in which  2 pharmaceutical drug diversion can occur?  3 A. You know, I'm not very well versed  4 in that area. So I guess the -- it's my  5 understanding that diversion can occur a few  6 different ways. But like I said, I don't --  7 it's hard for me to get into specifics because  8 I've never done an investigation specifically  9 like that.  10 Q. Now, you do supervise Detective  11 Prince and Patena, correct?  12 A. I supervise them in terms of making  13 sure that they're -- show up on time and that  14 they do what they're supposed to do. And John  15 tells me Detective Prince tells me, as well as  16 Detective Patena, some of the cases that  17 they're on.  18 But especially Detective Prince  19 works hand in hands with the DEA. And so he'll  20 tell me what they have going on. But like I  21 said, I don't know exactly what his methods are  22 that he uses.  23 Q. So you don't really direct their  24 investigations?  25 A. I do not direct his investigations,</p>	<p style="text-align: right;">Page 145</p> <p>1 along those lines.  2 Q. So are you aware of like doctor  3 shopping? Do you know what that is?  4 A. I know what it is.  5 Q. What is it?  6 A. It's when one person will go to  7 several doctors and try and get the same  8 prescription.  9 Q. Are you familiar with prescription  10 forgery?  11 A. Yes.  12 Q. That's a form of diversion as well?  13 A. Yes. Stolen script pads are not  14 uncommon or manufactured script pads.  15 Q. Do you consider diversion to be a  16 part of the cause of the opioid epidemic in  17 Cleveland?  18 A. I'm not sure. Like I said, my grasp  19 of the whole diversion program is limited.  20 Q. So you don't have a view one way or  21 the other?  22 A. Not really.  23 Q. When did you become aware of  24 prescription drug diversion?  25 A. When I started in the narcotics,</p>



<p style="text-align: right;">Page 146</p> <p>1 there was a detective named Greg Whitney. I 2 know he was in the diversion program. 3 Once again, I'm more concerned with 4 gang investigations and gang members than I am 5 with prescription drugs or even, realistically, 6 drugs in general. 7 I'm concerned with the weapons that 8 the gang members are carrying, the violence 9 that they are inflicting on the neighborhoods. 10 So that's my whole thinking for years, 11 especially when I was in the narcotics unit 12 assigned to the gang unit, is that how can we 13 decrease the violence in neighborhoods. And if 14 it happened to be through narcotics, then it 15 worked. 16 (Deposition Exhibit 16 was marked 17 for identification.) 18 BY MR. ROMAN: 19 Q. Sergeant Baeppler, I'm handing you 20 what has been marked as Baeppler Exhibit 16. 21 It's a multi-page document bearing production 22 Nos. CLEVE 002366453 through 61. 23 Have you ever seen this document 24 before? 25 A. Yes.</p>	<p style="text-align: right;">Page 148</p> <p>1 A. That's not mine. 2 Q. Where is your signature? 3 A. At the top, "Examined by." 4 Q. Ah, sorry. Thank you. 5 And that's on Page 2, correct? 6 A. Yes. 7 Q. Do you know who approved it? 8 A. Commander Gingell and another deputy 9 chief, but I can't read his signature. 10 Q. Now, directing your attention to the 11 circled sentence on Page 2 or Page -- Page 454 12 of the Bates number, it says, in the lower 13 left-hand corner: "NADDI grant money is 14 available to pay for the training." 15 Do you see that? 16 A. Uh-huh. 17 Q. And then below that in handwriting 18 it says: "NADDI will pay for all cost. No 19 cost to city. Recommend approval." 20 Do you see that? 21 A. Yes, I do. 22 Q. And do you see whose signature that 23 is below that? 24 A. The initials of Commander Gingell. 25 Q. Okay. Now, I think we had a brief</p>
<p style="text-align: right;">Page 147</p> <p>1 Q. What is Exhibit 16? 2 A. It is a request to go to a seminar, 3 looks likes, to the -- for a drug conference 4 and seminar issued by the National Association 5 of Drug Diversion Investigators, Norfolk, 6 Virginia. 7 Q. So this is a request dated -- or 8 some time in August 2018 by Detective Patena to 9 you to attend a conference, correct? 10 A. Yes. 11 Q. And you -- that's your signature 12 approving it on Page 2? 13 A. I didn't necessarily approve the 14 traveling thing. All I did is sign it. 15 Because my signature is required for it to go 16 to the commander. So I signed it, and I 17 forward it to the commander without making a 18 recommendation either way. 19 Q. But that is your signature? 20 A. Yes. 21 Q. To be clear, your signature is on 22 the bottom of the second page on the lower 23 right-hand corner? 24 A. Whose? You're asking if it's mine? 25 Q. Yes.</p>	<p style="text-align: right;">Page 149</p> <p>1 discussion earlier about grants made for 2 training for Cleveland Police Department 3 detectives. 4 Do you recall that? 5 A. Yes. 6 Q. This is an instance, is it not, 7 where a Cleveland Police Department detective 8 was able to get trained in drug policing 9 without cost to the city, correct? 10 A. That's what it would appear to be, 11 yes. 12 Q. Do you know what -- for what other 13 police department activities the department has 14 received grant money? 15 MS. DEBROSSE: Object to form. 16 THE WITNESS: Not offhand. I'm sure 17 that they've received plenty. I know that I've 18 received training for gang stuff through other 19 grants. 20 BY MR. ROMAN: 21 Q. And how about specifically with 22 respect to drug programs; do you know how much? 23 A. I don't know how much money the 24 city's received from grants. 25 MR. ROMAN: Okay.</p>

<p style="text-align: right;">Page 150</p> <p>1 (Deposition Exhibit 17 was marked 2 for identification.) 3 BY MR. ROMAN: 4 Q. Sergeant Baeppler, I've handed you 5 what has been marked as Exhibit 17, which is a 6 two-page document to which is attached a much 7 longer document. The two-page document bears 8 production No. CLEVE 000266813 and 814. And 9 the attachment is CLEVE 000266815 through 875. 10 Have you seen this document 11 before -- these documents before? 12 A. No. I may have received an e-mail, 13 but I certainly didn't read all that. I don't 14 deal with grants. I never had. And there 15 would be no reason for me to start, especially 16 with something as lengthy as this. 17 Q. I don't blame you. 18 So let's start with the cover 19 e-mail. That's an e-mail dated May 10, 2018, 20 from Mr. Perhacs of the Ohio High Intensity 21 Drug Trafficking Area to you, correct? 22 A. Yes. 23 Q. You received that e-mail on or about 24 that date in the ordinary course of business? 25 A. Yes.</p>	<p style="text-align: right;">Page 152</p> <p>1 Patena use OARRS? 2 A. I believe they do 3 Q. So you view it as something that 4 could be used to detect diversion, but you're 5 not involved in diversion, correct? 6 A. No. I mean my primary 7 responsibility is HIDT. I take care of 8 day-to-day overdoses, fatal, nonfatal and 9 investigations going with that. And that's 10 very -- it consumes most of my time, almost all 11 my time 12 MR. ROMAN: Thank you, 13 Sergeant Baeppler 14 With respect to McKesson, Aseem here 15 is going to continue the examination 16 THE WITNESS: Okay 17 (Discussion held off the record ) 18 FURTHER EXAMINATION BY COUNSEL FOR DEFENDANT 19 McKESSON CORPORATION 20 BY MR. PADUKONE: 21 Q. Sergeant, have you ever had any 22 discussions with city officials about the 23 opioid problem in Cleveland? 24 A. I think we have gone over I've been 25 at some meetings</p>
<p style="text-align: right;">Page 151</p> <p>1 Q. And I'll represent to you that, if 2 you click the link at the bottom of the bottom 3 e-mail on that page, what you get is the 4 attachment. 5 Do you understand that? 6 A. Yes. 7 Q. Do you know whether the police 8 department's ever applied for a Bureau of 9 Justice assistance grant? 10 A. No, I don't know. 11 Q. Different subject. 12 Are you familiar with the Ohio 13 Automated Rx Reporting System, OARRS? 14 A. I know what it is. I've never used 15 it. 16 Q. What is it? 17 A. I'm not certain, but what I believe 18 it to be is it's a log of people getting 19 controlled substances that -- you know, that -- 20 it's a way to track to make sure that people 21 are not abusing or doctor shopping or something 22 along those lines. 23 That may be wrong, but that's my 24 perception of it. 25 Q. Do you know if Detectives Prince and</p>	<p style="text-align: right;">Page 153</p> <p>1 Q. So I recall we discussed a meeting 2 with Merrill Gordon. 3 Are there any other meetings you can 4 recall that you've been in with city officials? 5 A. Yeah. There's the other meeting 6 that we also discussed with the EMS people. 7 Q. So other than those two meetings 8 that we've already discussed, have there been 9 any other meetings where you discussed the 10 opioid issue with -- 11 A. There may have been, but not that I 12 can recall. You may not get this, but I don't 13 like meetings. I don't like being here. I 14 like being on the road. I like doing what I'm 15 supposed to be doing. And so meetings aren't 16 my thing, and I frankly avoid them. 17 Q. Is there anyone else within the 18 Cleveland Police Department who has 19 responsibilities for these types of meetings? 20 MS. DEBROSSE: Object to form. 21 THE WITNESS: I'm sure there is. My 22 commander would handle most of those. 23 BY MR. PADUKONE: 24 Q. And that's Commander Gingell? 25 A. Yes.</p>

<p style="text-align: right;">Page 154</p> <p>1 Q. Have you ever requested additional 2 resources or equipment for the narcotics unit? 3 A. I may have. I ask for a lot of 4 things. 5 Q. Do you recall the first time that 6 you made a request? 7 A. No. 8 Q. Do you recall the last time you made 9 a request? 10 A. No. 11 Q. Do you recall the types of requests 12 that you've made? 13 A. No. If you can give me something to 14 refresh my memory, that would be great. But I 15 can't -- those are kind of mundane things to 16 me, and I don't keep track of them. 17 Q. Have you ever, for example, 18 requested NARCAN? 19 A. Yes. 20 Q. When did you make that request? 21 A. I don't recall. I ended up getting 22 it on my own. 23 Q. Who did you make that request to? 24 A. I don't recall. 25 Q. Are there any other resource you've</p>	<p style="text-align: right;">Page 156</p> <p>1 an overdose. I don't want anyone around me, 2 you know, to accidentally overdose and me to be 3 powerless about it. 4 So no, I'm not going to wait for 5 anything, for that matter. I'm going to get it 6 as soon as I can, actually by any means 7 necessary, short of stealing. 8 Q. So when you said you got the NARCAN 9 on your own, was it just for yourself, your 10 personal use as an officer, or for -- 11 A. It was for me to carry. 12 MS. DEBROSSE: Object to form. 13 Go ahead. 14 BY MR. PADUKONE: 15 Q. For you to carry? 16 A. It was for me to carry and to have 17 with me on my person wherever I went. 18 Q. Did you also get it for your 19 narcotics unit colleagues? 20 A. Most of them already had it. 21 Q. And do you know where they got it 22 from? 23 A. No. 24 Q. I have a few more questions about 25 NARCAN.</p>
<p style="text-align: right;">Page 155</p> <p>1 requested? 2 A. I'm sure I have. I don't recall 3 every time I've made a request for anything. I 4 mean there's -- like I said, you're going to 5 have to be -- you're going to have to refresh 6 my memory or something here. 7 Q. So you mentioned that you had to get 8 the NARCAN on your own. 9 A. I did. I'm kind of resourceful that 10 way. 11 Q. Was it because, when you put in the 12 request, you didn't get NARCAN from the city? 13 A. I did get it -- I mean I got it from 14 EMS. I went to them. I explained the -- it 15 was when I first got here. I go, "Hey, I need 16 some," explained why I needed it. They 17 understood, and I got it. 18 Q. So when you say you got it on your 19 own, you got it from EMS? 20 A. Yeah. I directly went to them and 21 said, "I'd like to have it," you know, and that 22 was it. It wasn't some huge impediment like 23 that. But, you know, I'm not -- it's not 24 something that you want to wait around for. If 25 I'm dealing with fentanyl, I don't want to have</p>	<p style="text-align: right;">Page 157</p> <p>1 Did you receive any training to 2 administer NARCAN? 3 A. I believe I got it on-line. 4 Q. Was this training sponsored by the 5 Cleveland Police Department? 6 A. I'm not sure who it was sponsored 7 by. I think it might have been sponsored by 8 the state. I could be wrong. 9 Q. Are you aware of what costs were 10 associated with that treating program? 11 A. I'm not. 12 Q. Was this a training that was 13 required for all officers? 14 A. I think it was, but I'm not 15 positive. 16 Q. Do you know how the police 17 department obtained NARCAN for its officers? 18 A. No. 19 MS. DEBROSSE: Object to form. 20 BY MR. PADUKONE: 21 Q. Do you know whether they purchased 22 it? 23 A. I don't know. 24 Q. Previously we had looked at NARCAN 25 use numbers.</p>

<p style="text-align: right;">Page 158</p> <p>1 Do you recall looking at that</p> <p>2 exhibit?</p> <p>3 You get weekly updates from EMS</p> <p>4 about NARCAN usage; is that right?</p> <p>5 A. Yes.</p> <p>6 Q. Is that a method by which the city</p> <p>7 would track NARCAN usage?</p> <p>8 A. I don't know --</p> <p>9 MS. DEBROSSE: Object to form.</p> <p>10 THE WITNESS: I don't know how they</p> <p>11 -- other people do their tracking unless I'm --</p> <p>12 yeah. I don't know -- I can't tell -- I can't</p> <p>13 tell how anyone else tracks or other</p> <p>14 departments. I don't know what their info is.</p> <p>15 BY MR. PADUKONE:</p> <p>16 Q. Does the Cleveland Police Department</p> <p>17 track its NARCAN usage?</p> <p>18 A. I'm not sure who tracks it. I'm not</p> <p>19 -- I'm not privy to that info. They may; they</p> <p>20 may not. I don't know.</p> <p>21 Q. Do you track your NARCAN usage?</p> <p>22 A. We've never -- we haven't used it.</p> <p>23 No one in my unit since I've been here has used</p> <p>24 it.</p> <p>25 Q. And that's been how long now?</p>	<p style="text-align: right;">Page 160</p> <p>1 A. I was focused on gang stuff.</p> <p>2 Q. But you agree that, with NARCAN,</p> <p>3 fewer people overdose?</p> <p>4 A. I still think they overdose. I</p> <p>5 think the NARCAN -- I think the -- well, for</p> <p>6 sure the NARCAN saves people from overdosing.</p> <p>7 But if they don't overdose, it doesn't do</p> <p>8 anything to you. I mean if you take a NARCAN,</p> <p>9 it doesn't -- I mean it's not going to do</p> <p>10 anything unless you're actually overdosing.</p> <p>11 Follow?</p> <p>12 (Deposition Exhibit 18 was marked</p> <p>13 for identification.)</p> <p>14 BY MR. PADUKONE:</p> <p>15 Q. I'm handing you a document marked</p> <p>16 Exhibit 18. And it is a document Bates</p> <p>17 numbered CLEVE 000267663. And it's an e-mail</p> <p>18 dated April 19th, 2018 sent from you to James</p> <p>19 Sekerak.</p> <p>20 Do you recall sending this e-mail?</p> <p>21 A. I don't recall the exact time. But</p> <p>22 yes, I'm sure I sent it. That's me. That's</p> <p>23 how we talk or write.</p> <p>24 Q. So this is an e-mail you would have</p> <p>25 sent in the ordinary course of your business on</p>
<p style="text-align: right;">Page 159</p> <p>1 I know we've been through this</p> <p>2 before, but...</p> <p>3 A. A year and a few months.</p> <p>4 Q. Are you aware that Cleveland was</p> <p>5 slower than other police departments in having</p> <p>6 its officers carry NARCAN?</p> <p>7 MS. DEBROSSE: Object to form.</p> <p>8 THE WITNESS: I don't know what -- I</p> <p>9 don't know what other police departments are</p> <p>10 doing. Once again, you know, I know that</p> <p>11 you're going on some off these things.</p> <p>12 I was in the gang unit. I -- and if</p> <p>13 you're aware, Cleveland has a real gang</p> <p>14 problem. And there's over 130 homicides every</p> <p>15 year for the last three or four years. It's</p> <p>16 very violent. That's what I'm concerned with.</p> <p>17 That's what I've been concerned with until I</p> <p>18 came there.</p> <p>19 So in terms of slower departments or</p> <p>20 anything else, I couldn't tell you what other</p> <p>21 departments are doing drug-wise really either</p> <p>22 for the most part.</p> <p>23 Q. Because you're focused on --</p> <p>24 A. Before I was -- yes.</p> <p>25 Q. I'm sorry. Go ahead.</p>	<p style="text-align: right;">Page 161</p> <p>1 April 19th?</p> <p>2 A. Yeah. And I think I did figure out</p> <p>3 what caused the sharp decrease.</p> <p>4 Q. And what is that?</p> <p>5 A. Project DAWN.</p> <p>6 Q. And you touched on this earlier, but</p> <p>7 can you explain what Project DAWN is?</p> <p>8 A. Project DAWN is -- they give out</p> <p>9 NARCAN in little blue packets. And they give</p> <p>10 -- and they also tell detail on how to get</p> <p>11 treatment and so forth.</p> <p>12 But it's -- they give away NARCAN</p> <p>13 for free. And you give it to family members.</p> <p>14 Anyone who asks for it pretty much gets it.</p> <p>15 And I -- it's my experience that --</p> <p>16 and from what I've been told through people</p> <p>17 that are addicted, is that -- let's say the</p> <p>18 three of us are heroin addicts. What will</p> <p>19 happen is you two will do heroin. You'll shoot</p> <p>20 up or snort it, however. I'll sit back and</p> <p>21 watch you guys. If neither one of you fall out</p> <p>22 or start foaming at the mouth, then I know it's</p> <p>23 okay. Then -- but I'm waiting with the NARCAN</p> <p>24 in case it does happen. And then I'll inject</p> <p>25 myself because I'm under the impression that</p>

<p style="text-align: right;">Page 162</p> <p>1 I'll be okay.</p> <p>2 And so that would be a -- considered</p> <p>3 a NARCAN party, which has been -- you know,</p> <p>4 that's how it was explained to me.</p> <p>5 And so I think -- and so instead of</p> <p>6 calling -- and so let's just say that one of</p> <p>7 you did overdose. I can be right there with</p> <p>8 the NARCAN, and I can save you.</p> <p>9 In the meantime, EMS is not called</p> <p>10 for that. So there's no way that we can track</p> <p>11 that. That's my opinion.</p> <p>12 Q. So what is it that you meant when</p> <p>13 you wrote that you were trying to figure out</p> <p>14 what caused a sharp decrease -- and you just</p> <p>15 explained what you think was the reason -- but</p> <p>16 what did you mean by "sharp decrease"?</p> <p>17 MS. DEBROSSE: Object to form.</p> <p>18 THE WITNESS: Exactly what that is,</p> <p>19 a sharp decrease in the amount of NARCAN</p> <p>20 administered.</p> <p>21 BY MR. PADUKONE:</p> <p>22 Q. So, Sergeant, you've been in the</p> <p>23 police department for over 20 years now, almost</p> <p>24 25 years. And you've testified earlier that</p> <p>25 drug abuse has been a problem in Cleveland for</p>	<p style="text-align: right;">Page 164</p> <p>1 obviously. What I think, I think the problem</p> <p>2 was already started before.</p> <p>3 Once again, I'm going to go back to</p> <p>4 what started this. Okay? What I believe</p> <p>5 started it, at least. With the pills. You</p> <p>6 hook someone on an opioid. Now they're hooked</p> <p>7 on it, and now they're going to try and do</p> <p>8 whatever they can to continue that. So it's</p> <p>9 just more of a continuation.</p> <p>10 Q. How do you explain the instances</p> <p>11 where an overdose victim is buying cocaine but</p> <p>12 it's been laced with fentanyl?</p> <p>13 Because those people were not</p> <p>14 looking to buy an opioid; isn't that right?</p> <p>15 MS. DEBROSSE: Object to form.</p> <p>16 THE WITNESS: What is your question?</p> <p>17 BY MR. PADUKONE:</p> <p>18 Q. So you've testified many times today</p> <p>19 that your belief is that there's a link between</p> <p>20 prescription pills, which lead to people</p> <p>21 becoming addicted to those pills --</p> <p>22 A. Uh-huh.</p> <p>23 Q. -- and then eventually they turn</p> <p>24 towards heroin.</p> <p>25 A. Uh-huh.</p>
<p style="text-align: right;">Page 163</p> <p>1 quite a while and that the opioid epidemic may</p> <p>2 have started around 2008 or 2009.</p> <p>3 That's when you saw an increase; is</p> <p>4 that right?</p> <p>5 MS. DEBROSSE: Object to form.</p> <p>6 THE WITNESS: That would be when I</p> <p>7 noticed that something was going on. Just like</p> <p>8 I would notice that one gang starts showing up</p> <p>9 in a different area. It's a point of interest.</p> <p>10 It's a note. Okay?</p> <p>11 That's not where I'm liable to say,</p> <p>12 "Oh, my gosh. There's a huge problem here."</p> <p>13 That's when I noticed there's a shift. That's</p> <p>14 what I meant by that.</p> <p>15 BY MR. PADUKONE:</p> <p>16 Q. So given that you noticed a shift</p> <p>17 around that time, are there things that you</p> <p>18 know now that you wish you had known ten years</p> <p>19 ago, around the time that you discovered the</p> <p>20 shift, that would have helped you address that</p> <p>21 problem?</p> <p>22 A. Yeah. Aside from like knowing the</p> <p>23 winning lottery numbers, yeah, there have been</p> <p>24 a few things that I would like -- I mean I</p> <p>25 don't know what I could have done, you know,</p>	<p style="text-align: right;">Page 165</p> <p>1 Q. But there are some cases where</p> <p>2 people who overdose are purchasing cocaine, and</p> <p>3 that cocaine has been laced with the fentanyl,</p> <p>4 correct?</p> <p>5 A. Yes.</p> <p>6 Q. So are those people who have</p> <p>7 previously been addicted to prescription</p> <p>8 opioids?</p> <p>9 MS. DEBROSSE: Object to form.</p> <p>10 THE WITNESS: They could have been.</p> <p>11 But I mean that's not -- of course it's</p> <p>12 possible. But I'm not saying that. I'm not</p> <p>13 saying that they all have done that.</p> <p>14 What I'm saying there is someone</p> <p>15 went to buy cocaine, and there's fentanyl mixed</p> <p>16 in it. That's all I'm saying.</p> <p>17 BY MR. PADUKONE:</p> <p>18 Q. But in those cases, you can't</p> <p>19 necessarily draw a link between prior</p> <p>20 prescription opioid use --</p> <p>21 A. I cannot.</p> <p>22 Q. What exactly does the Cleveland</p> <p>23 Police Department do when its officials become</p> <p>24 aware that diversion is occurring?</p> <p>25 MS. DEBROSSE: Object to form.</p>



<p style="text-align: right;">Page 166</p> <p>1 BY MR. PADUKONE:</p> <p>2 Q. What are the steps you officers --</p> <p>3 your officers take when they learn of potential</p> <p>4 diversion?</p> <p>5 MS. DEBROSSE: Object to form.</p> <p>6 THE WITNESS: Diversion for what?</p> <p>7 BY MR. PADUKONE:</p> <p>8 Q. Diversion of prescription opioids.</p> <p>9 MS. DEBROSSE: Same objection.</p> <p>10 THE WITNESS: I'm not following your</p> <p>11 question.</p> <p>12 You're asking me what the steps are</p> <p>13 that Detective Prince would take for a</p> <p>14 diversion program?</p> <p>15 BY MR. PADUKONE:</p> <p>16 Q. If you're aware, yes.</p> <p>17 A. I'm not even going to go in there.</p> <p>18 Because I'm not sure exactly what steps he</p> <p>19 takes.</p> <p>20 (Deposition Exhibit 19 was marked</p> <p>21 for identification.)</p> <p>22 BY MR. PADUKONE:</p> <p>23 Q. So I handed you a document that is</p> <p>24 Bates labeled CLEVE 002371733. And it's titled</p> <p>25 -- it's dated December 1st, 2013. And it's</p>	<p style="text-align: right;">Page 168</p> <p>1 seized that month and 1,059 that were seized</p> <p>2 for the entire year to date.</p> <p>3 Do you see that?</p> <p>4 A. Yes.</p> <p>5 Q. Is that uncommon to see such --</p> <p>6 strike that.</p> <p>7 This number seems to suggest that</p> <p>8 there were 1,006 pills seized in November</p> <p>9 versus just about 50 pills seized before then;</p> <p>10 is that right?</p> <p>11 MS. DEBROSSE: Object to form.</p> <p>12 THE WITNESS: That's what it looks</p> <p>13 like.</p> <p>14 BY MR. PADUKONE:</p> <p>15 Q. Do you have any understanding of how</p> <p>16 that could happen?</p> <p>17 A. I was never in the fifth district</p> <p>18 vice unit. I can't begin to tell you what was</p> <p>19 going on in November of 2013 of that year. So</p> <p>20 no. I mean I can't tell you -- I have no idea.</p> <p>21 I wish I could answer it, but I'm kind of -- I</p> <p>22 can't help you there.</p> <p>23 Q. Do you have any estimate on the</p> <p>24 number of prescription drugs that the Cleveland</p> <p>25 Police Department seizes per month on average?</p>
<p style="text-align: right;">Page 167</p> <p>1 titled "Police Division Bureau of Special</p> <p>2 Services District Support Monthly Statistics,</p> <p>3 Fifth District Vice Unit." And it's for the</p> <p>4 month of November 2013.</p> <p>5 Do you recognize this document?</p> <p>6 A. No. I've never seen it before.</p> <p>7 Q. Do you recognize this type of</p> <p>8 document?</p> <p>9 A. No. I've never -- don't recall ever</p> <p>10 filling one out like this either before.</p> <p>11 Q. So you've never seen this type of</p> <p>12 vice report before?</p> <p>13 MS. DEBROSSE: Object to form.</p> <p>14 THE WITNESS: I've never been in the</p> <p>15 vice unit, any vice unit.</p> <p>16 BY MR. PADUKONE:</p> <p>17 Q. So I have a question about what</p> <p>18 appears on this document under "Narcotics</p> <p>19 Seized."</p> <p>20 Do you see that about halfway down</p> <p>21 the page in the middle?</p> <p>22 A. Yes.</p> <p>23 Q. So there's a listing for</p> <p>24 prescription drugs. And it says that there are</p> <p>25 a 1,006 prescription drug pills that were</p>	<p style="text-align: right;">Page 169</p> <p>1 A. No.</p> <p>2 Q. Do you recall any year where the</p> <p>3 number of prescription drugs seized increased</p> <p>4 or decreased?</p> <p>5 MS. DEBROSSE: Object to form.</p> <p>6 THE WITNESS: I'm sure that -- of</p> <p>7 course they're going to increase or decrease by</p> <p>8 month and by year. But I don't know whether --</p> <p>9 like I said, I'm sure I've seen documents. I</p> <p>10 can't recall any.</p> <p>11 Like this is -- I can't help you on</p> <p>12 this. Like I said, I don't have an answer to</p> <p>13 that. I don't recollect and I can't recall any</p> <p>14 specific month they went up or went down, for</p> <p>15 that matter.</p> <p>16 BY MR. PADUKONE:</p> <p>17 Q. Is there anyone in particular we</p> <p>18 should speak with to learn about that?</p> <p>19 A. Probably the vice units that keep</p> <p>20 these kind of statistics. I don't -- like I</p> <p>21 said, I've never seen this form before.</p> <p>22 Q. Do you know who would be in charge</p> <p>23 of these vice units?</p> <p>24 MS. DEBROSSE: Object to form.</p> <p>25 THE WITNESS: Each district has its</p>

<p style="text-align: right;">Page 170</p> <p>1 own vice unit. And whoever the sergeant or</p> <p>2 lieutenant is in charge of it.</p> <p>3 BY MR. PADUKONE:</p> <p>4 Q. Do you know whether Detective Prince</p> <p>5 would know about trends in prescription drug</p> <p>6 seizures in Cleveland?</p> <p>7 A. I don't know what he knows.</p> <p>8 Q. Have you ever heard of the ARCOS</p> <p>9 database?</p> <p>10 A. No.</p> <p>11 Q. Do you know whether anyone at the</p> <p>12 Cleveland Police Department has used ARCOS to</p> <p>13 learn what drugs are being sold in Cleveland?</p> <p>14 MS. DEBROSSE: Object to form.</p> <p>15 THE WITNESS: I don't know -- I</p> <p>16 don't even know whether -- what the database</p> <p>17 is. I don't know who uses it. I don't know</p> <p>18 what the ARCOS database does.</p> <p>19 BY MR. PADUKONE:</p> <p>20 Q. Are you familiar with suspicious</p> <p>21 order reports?</p> <p>22 A. Yeah. We touched on that earlier.</p> <p>23 I do have a slight understanding of what</p> <p>24 suspicious OARRS reports are.</p> <p>25 Q. Suspicious order reports, not OARRS.</p>	<p style="text-align: right;">Page 172</p> <p>1 communicated with the Board of Pharmacy or</p> <p>2 someone from the Board of Pharmacy?</p> <p>3 A. Well, if they did work for the Board</p> <p>4 of Pharmacy, which I thought they did, years</p> <p>5 ago. When I first went to the narcotics unit.</p> <p>6 Q. And around what year was that?</p> <p>7 A. 2005 or so.</p> <p>8 Q. And what was the extent of your</p> <p>9 communication with this individual who worked</p> <p>10 at the Board of Pharmacy?</p> <p>11 A. Not a whole lot. I was doing gang</p> <p>12 stuff. I was doing gang stuff. They do</p> <p>13 pharmaceutical stuff. Those are two different</p> <p>14 worlds right there. So my interaction was very</p> <p>15 limited. Maybe, "Hi. How you doing?" Stuff</p> <p>16 like that.</p> <p>17 Q. So nothing substantive that you can</p> <p>18 recall?</p> <p>19 A. Not that I can recall of anything of</p> <p>20 any substance.</p> <p>21 Q. Have you ever received information</p> <p>22 from the DEA to assist with an investigation?</p> <p>23 A. Yes.</p> <p>24 Q. In what type of case have you</p> <p>25 received information?</p>
<p style="text-align: right;">Page 171</p> <p>1 A. Oh, order?</p> <p>2 Q. Yeah?</p> <p>3 A. No. I don't know what those are.</p> <p>4 Q. And I'm guessing, since you don't</p> <p>5 know what they are, you're not aware of any</p> <p>6 Cleveland Police Department employee or</p> <p>7 Cleveland official ever contacting the DEA or</p> <p>8 distributor to gain access to these types of</p> <p>9 reports?</p> <p>10 A. Maybe they did, but I'm not aware of</p> <p>11 them.</p> <p>12 Q. Have you had any interactions with</p> <p>13 the Board of Pharmacy?</p> <p>14 A. Very limited. I like see -- I've</p> <p>15 seen them in the office -- in our old office</p> <p>16 before, but I haven't seen them in the new</p> <p>17 office.</p> <p>18 I mean I -- when you say the Board</p> <p>19 of Pharmacy, I think I know like some</p> <p>20 detectives, especially former detectives, go</p> <p>21 work for them when they -- when they leave the</p> <p>22 city.</p> <p>23 But once again, I haven't seen them</p> <p>24 in a couple of years.</p> <p>25 Q. When was the first time you</p>	<p style="text-align: right;">Page 173</p> <p>1 A. All kinds. You name it. All kinds.</p> <p>2 But I've worked with the DEA for years, off and</p> <p>3 on, depending on who's there and so forth.</p> <p>4 Q. So does this include cases that</p> <p>5 involve prescription opioids?</p> <p>6 A. I don't recall a case with</p> <p>7 prescription opioids.</p> <p>8 Q. Heroin?</p> <p>9 A. Yes.</p> <p>10 Q. Cocaine?</p> <p>11 A. Yes.</p> <p>12 Q. Meth?</p> <p>13 A. Maybe a couple large-scale ones, but</p> <p>14 nothing -- like no -- no meth labs.</p> <p>15 Q. Marijuana?</p> <p>16 A. Yes.</p> <p>17 Q. Any other drugs that jump out at you</p> <p>18 that I haven't mentioned already?</p> <p>19 A. Not that I recall. You hit all the</p> <p>20 main ones.</p> <p>21 Q. Have you ever asked the DEA for</p> <p>22 information about doctors that prescribe a high</p> <p>23 amount of opioid prescriptions?</p> <p>24 A. No.</p> <p>25 Q. Have you ever asked the DEA about</p>

<p style="text-align: right;">Page 174</p> <p>1 pill mills?</p> <p>2 A. No.</p> <p>3 Q. Have you ever asked the DEA about</p> <p>4 suspicious orders of prescriptions?</p> <p>5 A. No.</p> <p>6 Q. Is there a reason why you haven't</p> <p>7 asked?</p> <p>8 MS. DEBROSSE: Object to form.</p> <p>9 THE WITNESS: Yes. Because before</p> <p>10 that I was in the gang unit. And since I've</p> <p>11 been there, I have Detective Prince who handles</p> <p>12 all relations with the DEA along those lines.</p> <p>13 BY MR. PADUKONE:</p> <p>14 Q. So that would have been Detective</p> <p>15 Prince's responsibility, if -- if at all?</p> <p>16 A. If -- if Detective --</p> <p>17 MS. DEBROSSE: Object to form.</p> <p>18 THE WITNESS: Detective Prince has</p> <p>19 been doing prescriptions for years, if I'm --</p> <p>20 once again, prescription drugs are much</p> <p>21 different than the street drugs that we deal</p> <p>22 with. It's a niche. It's a specialized thing.</p> <p>23 And if you're specializing, it's</p> <p>24 very hard, especially to -- to figure out all</p> <p>25 the nuances with the pharmaceuticals.</p>	<p style="text-align: right;">Page 176</p> <p>1 Q. So do you think the Cleveland Police</p> <p>2 Department does a good job of tracking the</p> <p>3 number of opioids that are shipped and</p> <p>4 delivered in Cleveland?</p> <p>5 A. So you're asking me if the DEA knows</p> <p>6 how many drugs are shipped and delivered in</p> <p>7 Cleveland, like from one Cleveland location to</p> <p>8 another Cleveland location, or from outside of</p> <p>9 Cleveland into Cleveland?</p> <p>10 Q. Outside of Cleveland into Cleveland.</p> <p>11 A. They may have some estimates. I</p> <p>12 don't know what their estimates are. I mean --</p> <p>13 and I can't tell you if they're better than my</p> <p>14 estimates. Because they don't know what my</p> <p>15 estimates are either.</p> <p>16 Q. And do you have estimates?</p> <p>17 A. In terms of like how much heroin is</p> <p>18 being shipped in?</p> <p>19 Q. Yes. Let's start with heroin.</p> <p>20 Do you have estimates of how much is</p> <p>21 being shipped into Cleveland?</p> <p>22 A. By weight?</p> <p>23 Q. Sure.</p> <p>24 A. I'm sure that there's several kilos</p> <p>25 being shipped in every month, every week, of</p>
<p style="text-align: right;">Page 175</p> <p>1 BY MR. PADUKONE:</p> <p>2 Q. Would you agree that the DEA would</p> <p>3 have a more complete picture of the number of</p> <p>4 opioids that have been shipped and delivered</p> <p>5 into Cleveland than the Cleveland Police</p> <p>6 Department would have?</p> <p>7 MS. DEBROSSE: Object to form.</p> <p>8 THE WITNESS: Can you repeat that</p> <p>9 again.</p> <p>10 BY MR. PADUKONE:</p> <p>11 Q. Would you agree that the DEA would</p> <p>12 have a more complete picture of the number of</p> <p>13 opioids shipped and delivered into Cleveland</p> <p>14 than the Cleveland Police Department would</p> <p>15 have?</p> <p>16 A. I would not agree with that.</p> <p>17 Q. Why is that?</p> <p>18 A. Because I don't know what they know.</p> <p>19 Q. So you're not sure whether the DEA</p> <p>20 has a more complete picture?</p> <p>21 MS. DEBROSSE: Object to form.</p> <p>22 THE WITNESS: I don't know what they</p> <p>23 know. I know what I know. And so you're</p> <p>24 asking me to compare an unknown.</p> <p>25 BY MR. PADUKONE:</p>	<p style="text-align: right;">Page 177</p> <p>1 heroin by various means.</p> <p>2 Q. And what is your basis for that</p> <p>3 estimates?</p> <p>4 A. The amount of heroin that's used</p> <p>5 every day has got to be a substantial amount of</p> <p>6 heroin, and fentanyl for that matter. And --</p> <p>7 and heroin shipments that we've intercepted.</p> <p>8 I'm sure that it comes in by ounces, and it's</p> <p>9 come in by several kilos at a time.</p> <p>10 Q. What about prescription opioids that</p> <p>11 are shipped and distributed within Cleveland;</p> <p>12 do you know whether the DEA tracks that?</p> <p>13 A. Real or counterfeit?</p> <p>14 Q. Real.</p> <p>15 A. I don't know.</p> <p>16 Q. And is that something your</p> <p>17 department tracks?</p> <p>18 A. We don't know how many pills are</p> <p>19 sent to the City of Cleveland. I don't know</p> <p>20 that. I don't know if anyone knows that.</p> <p>21 Would be curious to know that, but I don't</p> <p>22 know.</p> <p>23 Q. Is that a piece of information that</p> <p>24 you think would useful for the compliance unit?</p> <p>25 A. It could be; it may not be. I don't</p>

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1 know. It all depends if it's being abused, I  
2 guess.  
3 You have to have a baseline  
4 somewhere. I don't even know what the baseline  
5 would be.  
6 Q. So do you agree that it's important  
7 to have accurate information about the problem  
8 that you're addressing, so in this case,  
9 accurate statistics about opioid abuse?  
10 MS. DEBROSSE: Object to form.  
11 THE WITNESS: Repeat your question  
12 for me.  
13 BY MR. PADUKONE:  
14 Q. Do you think it's important to have  
15 accurate information about the opioid abuse  
16 problem in Cleveland?  
17 A. It's good to have as accurate  
18 information as you can. Sometimes you can't  
19 always get info you want. Sometimes you're not  
20 given all the info. You just do the best you  
21 can. That's what we do in Cleveland. Because  
22 we don't always have what we need to make the  
23 best of it.  
24 Q. And that includes tracking  
25 statistics?

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1 A. Everything.  
2 MR. PADUKONE: I'm going to hand you  
3 a document that I am marking as Exhibit 20.  
4 And it's Bates labeled 000267609.  
5 (Deposition Exhibit 20 was marked  
6 for identification.)  
7 BY MR. PADUKONE:  
8 Q. I'll give you a second to look at  
9 this e-mail.  
10 But for the record, it's an e-mail  
11 from Gary Gingell to Matthew Baeppler and Mike  
12 Connelly dated February 7th, 2018.  
13 A. Okay. Go ahead.  
14 Q. Do you recall receiving this e-mail  
15 during the ordinary course of business on  
16 February 7th, 2018?  
17 A. I sent it.  
18 Q. So you sent the e-mail on February  
19 6th --  
20 A. Yes.  
21 Q. -- 2018.  
22 And then Commander Gingell responded  
23 on February 7th; is that right?  
24 A. Yes.  
25 Q. And both of those were sent and

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1 received in the ordinary course of business on  
2 those days?  
3 A. That's correct.  
4 Q. So I want to direct your attention  
5 to the last sentence of your e-mail on February  
6 6th. And you wrote: "The second district is  
7 ground zero when it comes to fatal and nonfatal  
8 overdoses. If we are to accurately document,  
9 track and investigate these ODs, we need the  
10 second district personnel on the same page."  
11 Do you see that?  
12 A. Uh-huh.  
13 Q. What is the second district?  
14 A. It's one of five districts in the  
15 City of Cleveland where the -- every -- so the  
16 city's broken up into districts -- in police  
17 districts. It's not the same thing as like the  
18 wards. And so every district is basically like  
19 its own little police force.  
20 Q. And what geographic does the second  
21 district cover?  
22 A. The near west side.  
23 Q. And so in this e-mail, are you  
24 expressing concern that the second district  
25 didn't report a fatal overdose?

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1 A. Yeah. There was an issue. I'm not  
2 sure happened. I mean but yeah, they did not  
3 notify us. And that happens. Sometimes  
4 they're busy or what have you. But yeah, they  
5 didn't notify us when they probably should  
6 have.  
7 Q. Why is reporting this information  
8 important to the Cleveland Police Department?  
9 MS. DEBROSSE: Object to form.  
10 THE WITNESS: Because I want to find  
11 out who killed this person. I want to find out  
12 the dealer that sold this addicted person a  
13 fatal dose of heroin or whatever it was.  
14 That's what I -- I don't want another person to  
15 die, is my main goal, is to prevent someone  
16 else from getting killed or injured.  
17 So yeah. You can see why -- you can  
18 tell from this e-mail I'm not terribly happy.  
19 BY MR. PADUKONE:  
20 Q. And was this an isolated incident,  
21 or was this --  
22 A. It actually was more of an isolated  
23 incident. They have a lot of overdoses in the  
24 second district.  
25 I don't recall exactly what the

<p style="text-align: right;">Page 182</p> <p>1 issue was. But, you know, I was just making --</p> <p>2 you know, I was hoping to rectify the situation</p> <p>3 so it didn't happen again.</p> <p>4 Q. So it wasn't a general problem that</p> <p>5 the second district had in terms of reporting</p> <p>6 these incidents?</p> <p>7 MS. DEBROSSE: Object to form.</p> <p>8 THE WITNESS: I think this was the</p> <p>9 exception.</p> <p>10 BY MR. PADUKONE:</p> <p>11 Q. But it's fair to say that the</p> <p>12 Cleveland police department's tracking of</p> <p>13 opioid overdoses may be incomplete because of</p> <p>14 situations like this where it doesn't get</p> <p>15 reported?</p> <p>16 MS. DEBROSSE: Object to form.</p> <p>17 THE WITNESS: I would say that this</p> <p>18 is the exception to the rule. I mean like with</p> <p>19 anything. With anything -- you're dealing with</p> <p>20 large numbers of anything, not -- nothing's</p> <p>21 going to be a hundred percent accurate.</p> <p>22 Even -- like I said, with anything</p> <p>23 you do -- could be a baseball game. You may</p> <p>24 have a stat that may be off. That just</p> <p>25 happens. And especially in the second district</p>	<p style="text-align: right;">Page 184</p> <p>1 And let me know when you've had a</p> <p>2 chance to review it.</p> <p>3 A. Okay.</p> <p>4 Q. Do you remember receiving this</p> <p>5 e-mail on March 8, 2018, in the ordinary course</p> <p>6 of your business?</p> <p>7 A. I can vaguely remember this, but</p> <p>8 yeah.</p> <p>9 Q. And these opioid scene alerts, were</p> <p>10 these e-mails that you would regularly receive?</p> <p>11 A. Yes. However, with this, this is</p> <p>12 one of those odd screens where the body was</p> <p>13 decomposed. Quite frankly, they really don't</p> <p>14 know what the cause of death was on scene for</p> <p>15 what ever reason.</p> <p>16 And if the supervisor -- that's who</p> <p>17 makes the call on scene -- and doesn't believe</p> <p>18 that it's an overdose, then we don't get a</p> <p>19 call. And for whatever reason, the supervisor</p> <p>20 didn't think it was an overdose. He or she may</p> <p>21 have their reasons.</p> <p>22 Q. So that leads to my next question:</p> <p>23 What qualifies a scene as a suspected overdose</p> <p>24 scene?</p> <p>25 Is there any standard that the</p>
<p style="text-align: right;">Page 183</p> <p>1 when they deal with a lot of them. That's all.</p> <p>2 BY MR. PADUKONE:</p> <p>3 Q. And have any other districts had</p> <p>4 this problem that you're aware of?</p> <p>5 A. I'm sure that it happens sometimes.</p> <p>6 I mean like I said, it's more the exception.</p> <p>7 It's an ongoing thing. I prefer to have as</p> <p>8 much info as I can. I don't like missing out</p> <p>9 on an opportunity to catch someone that's</p> <p>10 guilty of manslaughter or someone that I</p> <p>11 believe killed someone.</p> <p>12 So I mean it's life and death. So</p> <p>13 yeah, I would get a little upset about it. But</p> <p>14 I mean it happens. But this is a large</p> <p>15 aberration. Nothing is perfect. I get that.</p> <p>16 MR. PADUKONE: I'm going to hand you</p> <p>17 a document that is being marked as Exhibit 21.</p> <p>18 And the Bates number is CLEVE 000267423.</p> <p>19 (Deposition Exhibit 21 was marked</p> <p>20 for identification.)</p> <p>21 BY MR. PADUKONE:</p> <p>22 Q. And this is an e-mail. The top</p> <p>23 e-mail is from Gary Gingell to Matthew</p> <p>24 Baeppler, dated March 8, 2018. And the subject</p> <p>25 line is: "Update CCMEO Opioid Scene Alert."</p>	<p style="text-align: right;">Page 185</p> <p>1 police department has for someone -- for a</p> <p>2 supervisor --</p> <p>3 A. A standard? A standard is if</p> <p>4 there's evidence of drug use on scene. And so</p> <p>5 that is what they go by.</p> <p>6 Now, when the medical examiner gets</p> <p>7 there, and they talk to the police officer on</p> <p>8 the phone -- because that's what happens. The</p> <p>9 police officers get there. They'll call the</p> <p>10 ME, and they'll talk to the ME. And the ME</p> <p>11 will ask a series of questions.</p> <p>12 And one of them -- a couple of those</p> <p>13 questions deal with the person's history of</p> <p>14 drug abuse. If the person has a history of</p> <p>15 drug abuse, then the medical examiner should</p> <p>16 call us. They usually do call us.</p> <p>17 Unless there's also like a history</p> <p>18 of, you know, heart failure or something like</p> <p>19 that; and the guy is 89 years old; and the drug</p> <p>20 history goes way beyond that. Then we probably</p> <p>21 wouldn't get a call from them.</p> <p>22 But that -- so there are stopgaps in</p> <p>23 place to catch in case the supervisor does miss</p> <p>24 it. And that does happen. And then we'll get</p> <p>25 a call from the ME, and we'll go out there.</p>



<p style="text-align: right;">Page 186</p> <p>1 It's the best we couldn't do.</p> <p>2 So we -- there are systems in place</p> <p>3 to catch things if they fall through a crack.</p> <p>4 Q. So I see in this alert there's a</p> <p>5 description at the bottom that says: "No</p> <p>6 illegal drugs or alcohol."</p> <p>7 Do you see that?</p> <p>8 A. Uh-huh.</p> <p>9 Q. And I've seen other documents in the</p> <p>10 City of Cleveland's production, these scene</p> <p>11 alerts, that also include that description that</p> <p>12 there was no illegal drugs or alcohol.</p> <p>13 So you got into this a little bit</p> <p>14 just now, but can you explain what it is that</p> <p>15 would make that scene a suspected overdose</p> <p>16 scene, given that there was no illegal drugs or</p> <p>17 alcohol found at the scene?</p> <p>18 MS. DEBROSSE: Object to form.</p> <p>19 THE WITNESS: I don't know why they</p> <p>20 made this an alert. It doesn't really tell me</p> <p>21 a whole lot there, other than the person was</p> <p>22 unfortunately decomposed. Like I said, I don't</p> <p>23 have an answer for that.</p> <p>24 What I would need is obviously if</p> <p>25 there was a syringe or if there's some kind of</p>	<p style="text-align: right;">Page 188</p> <p>1 get an alert, and I'll end up going there.</p> <p>2 And I have been the first one there</p> <p>3 for those. And when I get there, then usually</p> <p>4 the medical examiner is already there, and</p> <p>5 there's already the -- a policeman or two are</p> <p>6 also on scene.</p> <p>7 Q. And when you've responded to these</p> <p>8 alerts and gone to the scene, have you noticed</p> <p>9 a large number of false alarms where there was</p> <p>10 no actual opioid overdose?</p> <p>11 A. That happens, yes.</p> <p>12 Q. Would you say it's common?</p> <p>13 A. No.</p> <p>14 Q. If you had to put a percentage on</p> <p>15 it, would you say 10 percent of the time?</p> <p>16 A. That's kind of hard to put a</p> <p>17 percentage on it. But sometimes they are;</p> <p>18 sometimes they're not. It all depends.</p> <p>19 Sometimes you'll get there, and the family</p> <p>20 cleans up, and there's no -- you're left</p> <p>21 scratching your head. And then you get with</p> <p>22 the toxicology reports that, you know, they</p> <p>23 had, you know, fentanyl in their system or</p> <p>24 heroin or cocaine whatever else.</p> <p>25 Other times you get there, and you</p>
<p style="text-align: right;">Page 187</p> <p>1 other evidence of drug use. Syringe would be</p> <p>2 the big one. Maybe a straw with a white power</p> <p>3 next to them or whatever powder next to them.</p> <p>4 Doesn't necessarily have to be white.</p> <p>5 Like I said, I wasn't there. I</p> <p>6 don't know what was there.</p> <p>7 BY MR. PADUKONE:</p> <p>8 Q. Have you ever been the officer</p> <p>9 responding to one of these overdose scenes as</p> <p>10 the first officer on scene?</p> <p>11 A. No.</p> <p>12 Q. Whose responsibility is that?</p> <p>13 A. Is what?</p> <p>14 Q. To be the first officer responding</p> <p>15 to one of these alerts?</p> <p>16 A. Well, an alert, you mean from the --</p> <p>17 you get an alert from the medical examiner.</p> <p>18 That is the only place the opioid alert comes</p> <p>19 from.</p> <p>20 I'll get calls from radio, and</p> <p>21 they'll say, "Hey, the -- 2Sam14 called and</p> <p>22 says that they -- he has what he believes is an</p> <p>23 overdose." And then I'll go from there.</p> <p>24 If it skips that, then I'll get, you</p> <p>25 know, the opioid scene alert. And then -- I'll</p>	<p style="text-align: right;">Page 189</p> <p>1 look around, and you'll see evidence of a --</p> <p>2 like a drug wrapper or drug package. And the</p> <p>3 problem with that is, unless you're</p> <p>4 specifically trained in it, you're not going to</p> <p>5 see it.</p> <p>6 And when I say "specifically</p> <p>7 trained," not everybody can be an expert in</p> <p>8 drug packaging. Because it's -- once again, I</p> <p>9 hate to use the word "niche," but that's what</p> <p>10 it is. You have to see it all the time.</p> <p>11 I mean I could show you examples. I</p> <p>12 could tell you examples. It could be a folded</p> <p>13 piece of piece. It could be a folded-up dollar</p> <p>14 bill. It could be a piece of cellophane. Most</p> <p>15 of the time it looks like a piece of garbage.</p> <p>16 So unless you know what you're</p> <p>17 looking for, you're going to miss it.</p> <p>18 Q. Do you know whether the City of</p> <p>19 Cleveland or, more specifically, the Cleveland</p> <p>20 Police Department uses these opioid scene</p> <p>21 alerts to track the number of overdose</p> <p>22 incidents in the city?</p> <p>23 MS. DEBROSSE: Object to form.</p> <p>24 THE WITNESS: I don't know what the</p> <p>25 city does. I don't know how they track things.</p>

<p style="text-align: right;">Page 190</p> <p>1 I frankly -- there could be a way to track</p> <p>2 them, and maybe the city is doing it, but I</p> <p>3 don't know of it. Not off hand.</p> <p>4 BY MR. PADUKONE:</p> <p>5 Q. And you don't know whether the</p> <p>6 police department is doing it either?</p> <p>7 A. No. I know Commander Gingell has</p> <p>8 them tracked. He tracks them as best as he</p> <p>9 can, you know, all the ones that we go to.</p> <p>10 Q. And does he rely on these scene</p> <p>11 alerts to track them, or is there a number --</p> <p>12 A. I'm not quite sure what he relies</p> <p>13 on.</p> <p>14 MS. DEBROSSE: Object to form.</p> <p>15 MR. PADUKONE: I want to show you</p> <p>16 another document. It's going to be marked</p> <p>17 Exhibit 22. And it's Bates labeled CLEVE</p> <p>18 000267124.</p> <p>19 (Deposition Exhibit 22 was marked</p> <p>20 for identification.)</p> <p>21 BY MR. PADUKONE:</p> <p>22 Q. And this is a document dated March</p> <p>23 28, 2018. It's an e-mail from Gary Gingell to</p> <p>24 Matt Baeppler with the subject line: "Forward:</p> <p>25 Update C/W indictments for fatals 2016 to</p>	<p style="text-align: right;">Page 192</p> <p>1 Q. What about 2017, 2017 indictments</p> <p>2 VSDL 4; do you know whether that number was</p> <p>3 accurate?</p> <p>4 A. I don't.</p> <p>5 Q. What about 2018 indictments?</p> <p>6 It says: "Involuntary manslaughter</p> <p>7 2."</p> <p>8 Is that an accurate number?</p> <p>9 A. I believe we had more than that.</p> <p>10 And we had definitely more VSDLs in 2018.</p> <p>11 Q. And this was an e-mail sent in March</p> <p>12 of 2018. So that would have been from the</p> <p>13 first part of the year.</p> <p>14 A. Yes. And keep in mind I came in at</p> <p>15 the end of 2017.</p> <p>16 Q. So in the top e-mail sent by</p> <p>17 Commander Gingell, he says: "Matt, there has</p> <p>18 to be more than this. 2017 4 VSDL. If that is</p> <p>19 the case, we should be shutting down HIDI."</p> <p>20 Do you know what he meant by that?</p> <p>21 MS. DEBROSSE: Object to form.</p> <p>22 THE WITNESS: Well, I can only -- I</p> <p>23 mean it's hard to say what he meant. I mean</p> <p>24 obviously to me he's -- this is a low number.</p> <p>25 What's going on.</p>
<p style="text-align: right;">Page 191</p> <p>1 2018."</p> <p>2 A. Yep. Go ahead.</p> <p>3 Q. So is this an e-mail that you</p> <p>4 received during the normal course of business</p> <p>5 on March 28, 2018, from Commander Gingell?</p> <p>6 A. The top part, yes.</p> <p>7 Q. And then the bottom e-mail is an</p> <p>8 e-mail that you received from Jennifer Gedeon</p> <p>9 on March 28?</p> <p>10 A. Uh-huh.</p> <p>11 Q. Who is Jennifer Gedeon?</p> <p>12 And am I saying her name correctly?</p> <p>13 A. That's the -- Commander Gingell's</p> <p>14 office manager, I guess you'd call her.</p> <p>15 Q. And below the 2016 indictments, it</p> <p>16 says: "Manslaughter 3, tampering with evidence</p> <p>17 1, VSDL 3."</p> <p>18 Do you see that?</p> <p>19 A. Uh-huh.</p> <p>20 Q. What does VSDL stand for?</p> <p>21 A. Violation state drug law.</p> <p>22 Q. And are the numbers represented here</p> <p>23 accurate?</p> <p>24 A. I'm not sure. I wasn't around in</p> <p>25 2016.</p>	<p style="text-align: right;">Page 193</p> <p>1 I think that there were more than</p> <p>2 that. But there's also a record number of</p> <p>3 overdoses that year. There's a lot. There's a</p> <p>4 lot of overdoses. And it was kind of hard for</p> <p>5 these guys to keep up with it. They're just</p> <p>6 treading water at that point.</p> <p>7 BY MR. PADUKONE:</p> <p>8 Q. So it's your belief that the numbers</p> <p>9 were higher, but because of the number, the</p> <p>10 officers and detectives weren't tracking it?</p> <p>11 A. You know what? You know, I can't</p> <p>12 really say. I wasn't there the whole year. So</p> <p>13 I don't know.</p> <p>14 Q. The commander tells you to: "Get</p> <p>15 with these guys and get everything. From now</p> <p>16 on tracking this has to be a priority. We need</p> <p>17 to set up a way to track it so you remember to</p> <p>18 ask these guys about outcomes."</p> <p>19 Do you remember responding to</p> <p>20 Commander Gingell's e-mail, either verbally or</p> <p>21 by e-mail?</p> <p>22 A. I don't recall responding. I mean</p> <p>23 just telling him that I'm going to do the best</p> <p>24 I can. Something -- words to that effect.</p> <p>25 Q. And what did you do in response to</p>

<p style="text-align: right;">Page 194</p> <p>1 Commander Gingell's request that you get with 2 these guys and get everything? 3 A. I asked them to tell me everything 4 that -- you know, what they had. 5 (Deposition Exhibit 23 was marked 6 for identification.) 7 MR. PADUKONE: I'm handing you a 8 document that has been marked as Exhibit 23. 9 And it -- it has the Bates No. CLEVE 002231621. 10 And I'm attaching to it the e-mail 11 attachment, which does not -- it does not have 12 a Bates number. So I don't believe this is an 13 e-mail attachment, but we're going to mark this 14 together as one exhibit. 15 MS. DEBROSSE: Are you representing 16 this is the download from this e-mail? 17 MR. PADUKONE: That's one of my 18 questions for the sergeant. 19 BY MR. PADUKONE: 20 Q. So the e-mail is a March 29th, 2018 21 e-mail sent from you, Sergeant Baeppler, to 22 several other individuals who appear to work 23 for the City of Cleveland, including Detective 24 Prince, Detective Patena, Detective Klamert and 25 Commander Gingell.</p>	<p style="text-align: right;">Page 196</p> <p>1 Q. So do you recall sending out this 2 e-mail in response to what Commander Gingell 3 had asked you to do with regards to getting 4 with the guys to better track the numbers? 5 MS. DEBROSSE: Object to form. 6 THE WITNESS: I'm sure I did for 7 that reason. Because it's the next day after I 8 got that e-mail from the commander. And, of 9 course, if he's -- he's asking me, you know, 10 "There should be more," with a question mark. 11 So I'm questioning the guys is this correct. 12 So I'm trying to verify if this is 13 correct or not to make sure it's accurate. 14 BY MR. PADUKONE: 15 Q. So your basis for saying that the 16 list cannot be right is on the basis of what 17 Commander Gingell had told you the day before? 18 A. Well, from what he's saying, I would 19 believe that there would be more than that. 20 And so I want to know if there is. And so I 21 went and checked. 22 Q. And what did you find when you went 23 and checked? 24 A. I don't recall. 25 Q. Is there anyone we could talk to to</p>
<p style="text-align: right;">Page 195</p> <p>1 And you say: "I need stats from 2 everyone. This list cannot be right. Please 3 review and send Jen and I the updates." 4 Is this an e-mail you recall sending 5 on March 29th, 2018, in the ordinary course of 6 business? 7 A. Now, is this attached to this 8 e-mail? 9 Q. I believe that it is, but that's one 10 of my questions for you. 11 Do you recall -- 12 A. I don't know if this was attached to 13 it. I mean it's kind of hard for me to say -- 14 you're throwing something out. I don't know if 15 this was attached to it or not. There's no way 16 I can remember it from almost a year ago. 17 Q. So setting aside the attachment for 18 now, this e-mail -- the date of this e-mail is 19 March 29th, 2018; is that right? 20 A. Uh-huh. 21 Q. And if you look at the previous 22 exhibit, the one that we had been looking at 23 before, the date of that was March 28, 2018; is 24 that right? 25 A. Uh-huh.</p>	<p style="text-align: right;">Page 197</p> <p>1 figure out what you found? 2 A. I don't know. Look at the later 3 statistics, I guess, and see if they changed. 4 I don't recall if they changed or not. But I'm 5 just asking everyone to review it. 6 Q. And did you ever have to ask people 7 to review the stat on any other occasions, or 8 was this the only time that you've actually had 9 to do that? 10 A. I don't recall. There may have been 11 another occasion. 12 Q. So is it fair to say that it wasn't 13 uncommon for the tracking numbers to be 14 inaccurate? 15 MS. DEBROSSE: Object to form. 16 THE WITNESS: We try and keep as 17 accurate information as possible. 18 BY MR. PADUKONE: 19 Q. But it isn't always accurate? 20 A. It's as accurate as we can make it. 21 We -- listen, we try the best we can. No one 22 is perfect. But we try the best. All right? 23 MR. PADUKONE: I'll hand you a 24 document that's being marked as Exhibit 24. 25 And it's Bates No. CLEVE 000267426 plus its</p>

<p style="text-align: right;">Page 198</p> <p>1 attachment, which is CLEVE 000267427 through 2 429. 3 (Deposition Exhibit 24 was marked 4 for identification.) 5 BY MR. PADUKONE: 6 Q. And the e-mail is a March 7, 2018 7 e-mail from James Sekerak to Matthew Baeppler. 8 And the attachment appears to be a NARCAN 9 overdose report. 10 A. Are you saying that this report was 11 attached to this e-mail? 12 Q. Yes. 13 A. Are you sure this was attached to 14 that? 15 Q. It was produced to us as an 16 attachment. 17 Why is it that you don't think it 18 was attached to this e-mail? 19 A. I don't recall seeing it. This is 20 not the report I normally look at. 21 Q. What is the report you normally look 22 at? 23 Have we look at it today? 24 A. The report I usually get only has 25 the bottom part, NARCAN administer details.</p>	<p style="text-align: right;">Page 200</p> <p>1 A. I received this part here, the 2 bottom part, which I receive all the time. If 3 I got this, you know, like I said, I 4 basically -- the one on the right, the NARCAN 5 by primary impression, I may have gotten this 6 one time. This would be the only time. 7 Because I normally -- like I said, we normally 8 don't get these. 9 If you look at it though, it 10 basically shows you where the most NARCAN is 11 being administered, which is also where the 12 most heroin overdoses occur. 13 Q. Do you recall why Mr. Sekerak sent 14 you this e-mail? 15 MS. DEBROSSE: Object to form. 16 THE WITNESS: I don't recall exactly 17 why. 18 BY MR. PADUKONE: 19 Q. The reason I ask is just, based off 20 of the context of this e-mail, it seemed to me 21 that perhaps you had a conversation with them 22 earlier, and he was sending you information 23 based off of a discussion. 24 Do you recall having a discussion 25 with Mr. Sekerak?</p>
<p style="text-align: right;">Page 199</p> <p>1 But I'm not -- I mean I'm not saying 2 that I didn't get this. But I don't recall it 3 like this. Because normally I don't get them 4 in this fashion at all. Normally I just get 5 the bottom half, like I said, the NARCAN 6 administer details. I don't have the NARCAN by 7 primary impression. 8 Q. But you have no reason to doubt that 9 you received this e-mail on March 7th -- 10 A. This e-mail. 11 Q. Yes. 12 A. But not this. 13 Q. You're not sure that you received 14 that. 15 A. No. I don't recall seeing this. 16 Q. I'll represent to you that we 17 received this as a family member of the parent 18 e-mail and that this was the attachment to that 19 e-mail. 20 A. Okay. 21 Q. So I just have a few questions about 22 both of the documents. 23 So it sound like you don't -- you 24 don't recall ever receiving this type of 25 attachment; is that right?</p>	<p style="text-align: right;">Page 201</p> <p>1 A. I've had a few -- 2 MS. DEBROSSE: Object to form. 3 THE WITNESS: I've had a few 4 discussions with James. And I may have asked 5 him -- like I said, I mean I can't really 6 tell -- you ZIP codes would be -- I could see 7 it being something I would be interested in to 8 know exactly where these are occurring on a 9 map. And so this is what he sent me. 10 I would be interested in this. That 11 would be a question I would ask. I don't 12 specifically remember asking that question 13 though. 14 BY MR. PADUKONE: 15 Q. And you testified earlier that you 16 received the bottom half of that attachment; is 17 that right? 18 A. I get things -- look, I can't say 19 for certain that this is exactly what I see 20 this every -- you know, this day. I can't 21 remember all the info in there. But I see 22 stuff like that all the time. And that's what 23 I normally look at. 24 Q. Do you remember when you first 25 started receiving that type of information?</p>

<p style="text-align: right;">Page 202</p> <p>1 A. Yeah. We kind of went over it 2 before. We had a meeting, and I -- he started 3 sending me them. It's invaluable to me that I 4 get those. 5 Q. And you get them every week? 6 A. Yes. At least once a week. 7 Q. Sometimes more? 8 A. Uh-huh. Yes. Sometimes more. 9 Q. And what to you do after you receive 10 it? 11 How do you use the information that 12 you receive? 13 A. I'll get the information. I'll look 14 at the information on there. I'll look at the 15 NARCAN use. And then will try and look -- if 16 we didn't get an alert, if -- you know, so if 17 dispatch wasn't called, I want to know why we 18 weren't called to see if it was an actual 19 overdose. 20 And as I said before, just because 21 NARCAN is administered doesn't necessarily mean 22 that there was an overdose. It could be a 23 number of things. 24 And so what I want to do is I want 25 to be able to see if the police were called so</p>	<p style="text-align: right;">Page 204</p> <p>1 A. Not that I'm aware of. There may 2 be, but I'm not aware of it, at least not 3 offhand. 4 Q. And for incidents involving opioid 5 crimes or opioid overdoses, do you track which 6 overdose is involved when you enter in this 7 data? 8 A. Can you repeat that again. 9 Q. So when you're entering in data into 10 Case Explore, would you make a note of what 11 opioid is involved if the case involved an 12 opioid overdose? 13 A. Yes. 14 Q. And how is that information entered 15 in? 16 Is it in a description field? Is 17 there a specific field where you can say this 18 is the drug that -- 19 A. I believe it's a drop-down menu. 20 Because I've only done it a handful of times. 21 Q. And do you ever track whether those 22 opioids that were involved had been prescribed? 23 A. I don't know if they track that or 24 not. I don't recall. 25 Q. But you don't recall ever using a</p>
<p style="text-align: right;">Page 203</p> <p>1 that -- because I want to respond to more. I 2 want to respond to as many of these as I can. 3 And so I will compare this 4 address -- I'll plug it into the LERMS and see 5 if there's -- you know, if there's a report 6 made. And if there was a report made, I want 7 to read it. And that's why. 8 Q. Does the Cleveland Police Department 9 use any sort of database to track drug crimes? 10 A. I'm sure they do. I don't know what 11 it is. I don't get involved in the computer 12 stuff. 13 Q. Do you enter in any data from 14 drug-related investigations somewhere? 15 A. Me? We do -- every now and then I 16 might do a Case Explore. I might enter some 17 stuff. It's only been a couple of times that I 18 did that. 19 Q. So Case Explore is one database that 20 you've used to enter in information about drug 21 crimes? 22 A. Overdoses specifically. 23 Q. Overdoses? 24 Is there any other database like 25 Case Explore or any program that you use to --</p>	<p style="text-align: right;">Page 205</p> <p>1 drop-down menu to say prescription or not 2 prescription? 3 A. I have not. 4 Q. You have not. 5 A. I have not personally. 6 MR. PADUKONE: Okay. 7 (Deposition Exhibit 25 was marked 8 for identification.) 9 BY MR. PADUKONE: 10 Q. I'm handing you a document that has 11 been marked Exhibit 25. And it's CLEVE 12 000251274. This is a document that is titled 13 "Event Summary." And at the very top of the 14 page on the left-hand side, it says "I/Net 15 Viewer, Event Information." 16 Do you recognize this type of a 17 document? 18 A. It appears to be locations. It 19 appears to be locations of overdoses with 20 corresponding report numbers, the dates and 21 location -- the dates and times. Zone car 22 handled it. 23 Q. And is this the type of data that 24 the Cleveland Police Department maintains in 25 the ordinary course of business?</p>



<p style="text-align: right;">Page 206</p> <p>1 A. That's what it looks like.</p> <p>2 Q. Do you know where this data comes</p> <p>3 from?</p> <p>4 A. I couldn't tell you where this exact</p> <p>5 data comes from. I don't know where it came</p> <p>6 from.</p> <p>7 Q. Are you familiar with the LERMS</p> <p>8 database, L-E-R-M-S?</p> <p>9 A. Yes.</p> <p>10 Q. Do you know whether this data would</p> <p>11 also be in LERMS?</p> <p>12 A. There's a report number. So it</p> <p>13 would be in LERMS.</p> <p>14 Q. Sorry. Can you say that again.</p> <p>15 A. There is a report number. So yes,</p> <p>16 it would be in LERMS.</p> <p>17 Q. And which is the report number? The</p> <p>18 event number?</p> <p>19 A. Yes.</p> <p>20 Q. So I'd just like to get a better</p> <p>21 understanding of what's in this document.</p> <p>22 So the first column, this seems to</p> <p>23 be the number of incidents; is that right?</p> <p>24 It's in numerical order?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 208</p> <p>1 Q. And those are the five districts</p> <p>2 that we talked about earlier?</p> <p>3 A. Yes.</p> <p>4 Q. Then the fourth column says "PRI."</p> <p>5 Do you know what that stands for?</p> <p>6 A. I think it's priority run. So all</p> <p>7 these are broke down into priorities by</p> <p>8 importance. Most of these are 2s, so -- a</p> <p>9 couple of 1s in there.</p> <p>10 Q. What's the difference between a 2</p> <p>11 and a 1?</p> <p>12 A. A 1 is more important than a 2.</p> <p>13 Q. What makes it more important?</p> <p>14 A. Well, it's supposed to be because</p> <p>15 there's -- it's -- it's very important that the</p> <p>16 police get there as soon as possible. That's</p> <p>17 usually what it means.</p> <p>18 Q. And under what circumstances is it</p> <p>19 important for the police to get there as soon</p> <p>20 as possible?</p> <p>21 A. That the police have the -- you</p> <p>22 know, that there's a person with a gun on</p> <p>23 scene. Some way that the police can be of</p> <p>24 immediate assistance.</p> <p>25 Q. So it's not necessarily the case</p>
<p style="text-align: right;">Page 207</p> <p>1 Q. And then the second column is for</p> <p>2 "Agency," and each row seems to say CPD.</p> <p>3 Does that stand for Cleveland Police</p> <p>4 Department?</p> <p>5 A. It would seem to be, yes.</p> <p>6 Q. Would there ever be an occasion</p> <p>7 where the agency is something other than CPD?</p> <p>8 A. It could be CMHA.</p> <p>9 Q. What's that?</p> <p>10 A. Could be CMHA Cuyahoga Metro --</p> <p>11 whatever -- Housing Association.</p> <p>12 Q. And why would they appear in the</p> <p>13 Agency column?</p> <p>14 MS. DEBROSSE: Object to form.</p> <p>15 THE WITNESS: If they were the one</p> <p>16 entering the report.</p> <p>17 BY MR. PADUKONE:</p> <p>18 Q. I'm sorry. Could you say that</p> <p>19 again?</p> <p>20 A. If they were the one entering the</p> <p>21 report. But these are all CPD ones.</p> <p>22 Q. And then the third column says "D</p> <p>23 Group."</p> <p>24 Do you know what that means?</p> <p>25 A. District.</p>	<p style="text-align: right;">Page 209</p> <p>1 that it's a fatal overdose versus the nonfatal</p> <p>2 overdose?</p> <p>3 A. I'm fairly certain that a -- well,</p> <p>4 you know what? I'm not really sure. It could</p> <p>5 be either/or. I mean all depends on who's</p> <p>6 coding -- who's making it a priority.</p> <p>7 I'm not sure exactly how radio</p> <p>8 designates them. I don't designate them. They</p> <p>9 do. And that's my understanding of how they do</p> <p>10 it.</p> <p>11 Q. And so the next two columns appear</p> <p>12 to be self-explanatory. There's the date of</p> <p>13 the incident and then the time of the incident.</p> <p>14 And then the event number is what</p> <p>15 you previously testified comes from the LERMS;</p> <p>16 is that right?</p> <p>17 A. Yeah. That would be the -- yeah.</p> <p>18 Event number, which would be the -- if you</p> <p>19 transferred over, it'd be also the report</p> <p>20 number also.</p> <p>21 Q. And then what is the Type column?</p> <p>22 A. I don't know.</p> <p>23 Q. Do you know what "SDO" stands for?</p> <p>24 A. No.</p> <p>25 Q. Do you know what the Subtype column</p>

<p style="text-align: right;">Page 210</p> <p>1 stands for?</p> <p>2 A. I'm not sure.</p> <p>3 Q. 1M, 2M; do you know?</p> <p>4 MS. DEBROSSE: Object to form.</p> <p>5 THE WITNESS: I'm not sure.</p> <p>6 BY MR. PADUKONE:</p> <p>7 Q. What about Unit; what does that</p> <p>8 mean?</p> <p>9 A. That would be the car number that</p> <p>10 responded, the primary car number.</p> <p>11 Q. And then the Location column is also</p> <p>12 self-explanatory.</p> <p>13 And you testified earlier that these</p> <p>14 appear to be locations of overdoses; is that</p> <p>15 right?</p> <p>16 A. That's what it appears to be, yes.</p> <p>17 Q. Do you know why data that appears in</p> <p>18 this document only begins in April 2017?</p> <p>19 MS. DEBROSSE: Object to form.</p> <p>20 THE WITNESS: No, I don't know.</p> <p>21 BY MR. PADUKONE:</p> <p>22 Q. Do you know whether this data exists</p> <p>23 for other time periods as well?</p> <p>24 A. I don't know if it does or not.</p> <p>25 Q. And so I'm guessing you don't know</p>	<p style="text-align: right;">Page 212</p> <p>1 Q. Have you ever seen a document</p> <p>2 similar to this?</p> <p>3 A. No.</p> <p>4 Q. Do you have any idea where the data</p> <p>5 in this document comes from?</p> <p>6 A. I'm not certain where it comes from.</p> <p>7 Q. Do you know who would be responsible</p> <p>8 for entering in this data?</p> <p>9 A. I'm not certain.</p> <p>10 Q. Do you have any information on what</p> <p>11 each column in this document represents?</p> <p>12 MS. DEBROSSE: Object to form.</p> <p>13 THE WITNESS: I mean it's kind of</p> <p>14 self-explanatory what's going on if you read</p> <p>15 the -- if you read the columns and what's going</p> <p>16 on.</p> <p>17 BY MR. PADUKONE:</p> <p>18 Q. So, for example, let's start with</p> <p>19 complaint type.</p> <p>20 The first three complaints are</p> <p>21 deception, and then there's theft/drugs, and</p> <p>22 there's illegal processing, and then there's</p> <p>23 another deception; is that right?</p> <p>24 A. Yes.</p> <p>25 Q. Where do these complaints come from?</p>
<p style="text-align: right;">Page 211</p> <p>1 when the Cleveland Police Department started</p> <p>2 generating these types of reports?</p> <p>3 A. I don't know.</p> <p>4 MS. DEBROSSE: Object to form.</p> <p>5 BY MR. PADUKONE:</p> <p>6 Q. And do you know whether this data</p> <p>7 has been filtered in any way?</p> <p>8 MS. DEBROSSE: Object to form.</p> <p>9 THE WITNESS: I don't know if it has</p> <p>10 been filtered in any way.</p> <p>11 MR. PADUKONE: So this next document</p> <p>12 has been marked Exhibit 26. Its Bates number</p> <p>13 is CLEVE 000345261.</p> <p>14 (Deposition Exhibit 26 was marked</p> <p>15 for identification.)</p> <p>16 MS. DEBROSSE: After this exhibit,</p> <p>17 I'd like to take a ten-minute break.</p> <p>18 MR. PADUKONE: That's what we were</p> <p>19 thinking as well. So that's perfect.</p> <p>20 So for the record, this document is</p> <p>21 titled "Cleveland Police Narcotics Unit</p> <p>22 Compliance Case Tracker."</p> <p>23 BY MR. PADUKONE:</p> <p>24 Q. Do you recognize this document?</p> <p>25 A. No, I do not.</p>	<p style="text-align: right;">Page 213</p> <p>1 MS. DEBROSSE: Object to form</p> <p>2 THE WITNESS: I don't know This</p> <p>3 isn't my form I didn't fill this out I've</p> <p>4 never seen this form before</p> <p>5 BY MR. PADUKONE:</p> <p>6 Q. Do you know where compliance</p> <p>7 complaints generally come from?</p> <p>8 A. I imagine they come from doctors'</p> <p>9 offices and pharmacists</p> <p>10 Q. You don't have any idea who would</p> <p>11 have been responsible for filling out these</p> <p>12 forms?</p> <p>13 MS. DEBROSSE: Object to form</p> <p>14 THE WITNESS: I'm not certain If</p> <p>15 you're asking me a hundred percent who it is, I</p> <p>16 don't know</p> <p>17 BY MR. PADUKONE:</p> <p>18 Q. Do you have an idea of who might be</p> <p>19 response?</p> <p>20 A. I would imagine John Prince and</p> <p>21 Shelly Patena</p> <p>22 MR. PADUKONE: Let's take a break</p> <p>23 (A short recess was taken )</p> <p>24 EXAMINATION BY COUNSEL FOR DEFENDANT WAL-MART</p> <p>25 BY MR. McLAUGHLIN:</p>

<p style="text-align: right;">Page 214</p> <p>1 Q. Earlier today, Sergeant, Mr. Roman</p> <p>2 showed you a document with a long list of names</p> <p>3 of defendants.</p> <p>4 Do you recall that?</p> <p>5 A. Yes.</p> <p>6 Q. And prior to reviewing that</p> <p>7 document, did you know who any of the</p> <p>8 defendants were in this lawsuit?</p> <p>9 A. From my understanding,</p> <p>10 pharmaceutical companies.</p> <p>11 Q. And so you just knew generally</p> <p>12 pharmaceutical companies, but you didn't know</p> <p>13 specifically who the defendants were by name?</p> <p>14 A. That is correct.</p> <p>15 Q. Do you have any personal knowledge</p> <p>16 as to why the city sued Wal-Mart?</p> <p>17 A. Why they sued Wal-Mart?</p> <p>18 Q. Yes.</p> <p>19 A. No.</p> <p>20 Q. Do you have any personal knowledge</p> <p>21 as to why the city sued CVS, Rite Aid or</p> <p>22 Walgreens?</p> <p>23 A. No.</p> <p>24 Q. Do you have any personal knowledge</p> <p>25 as to why the city sued HBC Service Company?</p>	<p style="text-align: right;">Page 216</p> <p>1 damages that the city is claiming as part of</p> <p>2 this lawsuit?</p> <p>3 A. Not really, no. I -- once again, I</p> <p>4 am a line officer. I go out on the street</p> <p>5 every day. And that -- that's what I do. I</p> <p>6 try not to get involved, and I don't want to be</p> <p>7 involved with what happens in the upper levels.</p> <p>8 Q. I understand?</p> <p>9 A. And so that is the way -- that's why</p> <p>10 -- that's what I like, and that's where I</p> <p>11 prefer to be.</p> <p>12 Q. I understand, Sergeant. And I'm</p> <p>13 just asking you about what you know and don't</p> <p>14 know.</p> <p>15 So the answer to the question is</p> <p>16 "no," correct?</p> <p>17 A. I -- yes. That is correct. I don't</p> <p>18 know.</p> <p>19 Q. Can you tie any opioid-related costs</p> <p>20 incurred by the city specifically to the</p> <p>21 conduct of any defendant in this case?</p> <p>22 MS. DEBROSSE: Object to form.</p> <p>23 THE WITNESS: I don't know exactly</p> <p>24 what those companies did. I mean if you're</p> <p>25 asking do I know if they sold or produced drugs</p>
<p style="text-align: right;">Page 215</p> <p>1 A. No.</p> <p>2 Q. Can you personally point to any</p> <p>3 specific conduct by Wal-Mart related to opioids</p> <p>4 that caused harm to the city?</p> <p>5 A. I cannot.</p> <p>6 Q. Can you personally point to any</p> <p>7 specific conduct by CVS related to opioids that</p> <p>8 caused harm to the city?</p> <p>9 A. I cannot.</p> <p>10 Q. What about Rite Aid?</p> <p>11 A. I cannot.</p> <p>12 Q. What about Walgreens?</p> <p>13 A. I -- I cannot point to any specific</p> <p>14 instance for any of those.</p> <p>15 Q. Okay. Is it fair to say you cannot</p> <p>16 personally point to any specific conduct of any</p> <p>17 defendant in the case related to opioids that</p> <p>18 cause harm to the city?</p> <p>19 A. Well, if they did I'm unaware of the</p> <p>20 exact instances when -- in that they were</p> <p>21 involved.</p> <p>22 Q. And the same would be true of</p> <p>23 Walgreens and HBC Service Company as well?</p> <p>24 A. That would be correct.</p> <p>25 Q. Do you know anything about the</p>	<p style="text-align: right;">Page 217</p> <p>1 that led to someone's death, I can't tell you</p> <p>2 if that company sold or what that company sold</p> <p>3 to whoever person. I don't -- I don't have any</p> <p>4 numbers for that. I don't have -- I don't know</p> <p>5 what they produced and who they produced them</p> <p>6 to. So no, I can't.</p> <p>7 BY MR. McLAUGHLIN:</p> <p>8 Q. Okay. I understand your testimony.</p> <p>9 My question was can you tie any</p> <p>10 opioid-related costs incurred by the city</p> <p>11 specifically to the conduct of any defendant in</p> <p>12 this case?</p> <p>13 A. No. Because I don't -- once again,</p> <p>14 I don't know specifically what all those</p> <p>15 companies do.</p> <p>16 Q. Okay. We -- there was some</p> <p>17 testimony earlier today about addicts and</p> <p>18 addiction.</p> <p>19 Do you have any training or</p> <p>20 expertise in the diagnosis or treatment of</p> <p>21 addiction or substance abuse?</p> <p>22 A. Okay. I cannot treat addicted</p> <p>23 persons. That's not my role. I can -- I do my</p> <p>24 best to assist addicted persons to get help.</p> <p>25 So that's my role.</p>

<p style="text-align: right;">Page 218</p> <p>1 Q. Let me ask a slightly different 2 question. 3 You aren't qualified to diagnose 4 somebody with an addiction or substance abuse 5 disorder, are you? 6 A. The only thing that I can do is see 7 what someone is acting like. A lot of times I 8 can tell if someone is high. And if they tell 9 me that they do this, this or that, I can 10 recommend that they get help. 11 But I am not a certified specialist 12 in any regard like that. I'm just your basic 13 police officer, as most police officers are. I 14 don't know any that are also documented 15 therapists or anything else for that matter. 16 Q. Okay. So it's true that you aren't 17 qualified to diagnose somebody with an 18 addiction or substance abuse disorder, true? 19 A. Technically I cannot diagnosis 20 someone. Because that's not my field of 21 expertise. All I can do is tell, in my 22 experience, if they have a problem or not, and 23 I can direct them. 24 And if they say they have a problem, 25 if they say they use drugs every day, if they</p>	<p style="text-align: right;">Page 220</p> <p>1 if you don't understand a question that I've 2 asked, let me know, and I'll rephrase it. 3 And we'll try not to talk over each 4 other as we question and answer. Okay? 5 A. (Witness nodding head.) 6 Q. You mentioned the FBI task force is 7 part of the narcotics unit; isn't that right? 8 A. More like some of the -- FBI is not 9 part of the narcotics unit. The narcotics 10 unit's part of an FBI task force. Some members 11 are. 12 Q. Okay. Thank you for clarifying. 13 And you mentioned that the members 14 of the narcotics unit that participate in 15 this -- or that work with the FBI task force 16 handle large-scale wires related to drugs; 17 isn't that correct? 18 A. Yes. 19 Q. Are any of those cases -- do any of 20 those cases involve prescription drugs? 21 A. I'm not sure exactly what they 22 involve. Not that I'm aware of, but it may be 23 possible. I don't know. 24 Q. Mr. Roman earlier mentioned 25 prescription opioids coming in pill form.</p>
<p style="text-align: right;">Page 219</p> <p>1 say they use heroin every day, that's a pretty 2 good sign to me that I believe that they may be 3 addicted to drugs and that they need some help. 4 Q. And at that point, what you would 5 normally do would be try to direct them to a 6 medical professional that could help them with 7 their condition; is that fair? 8 A. Yes. 9 MR. McLAUGHLIN: I don't have any 10 further questions for you, Sergeant. Thank you 11 for your time. 12 EXAMINATION BY COUNSEL FOR DEFENDANT 13 TEVA PHARMACEUTICAL COMPANIES, INC. 14 BY MS. BARBER: 15 Q. Hi, Sergeant Baeppler. Are you 16 ready? 17 A. I'm ready. 18 Q. Okay. My name is Maureen Barber. I 19 represent the Teva defendants in this case. 20 I know we've talked about a lot. I 21 just have a few things to follow up on and a 22 few additional questions. They might be 23 scattered. So try to stay with me on the 24 topics. 25 As with my colleagues' questioning,</p>	<p style="text-align: right;">Page 221</p> <p>1 Do you remember that? 2 A. Yes. 3 Q. And we've sort of testified 4 throughout today about prescription opioids 5 coming in pill form. 6 Are you aware of prescription 7 opioids coming in any other form? 8 A. Yes. 9 Q. What form is that? 10 A. Fentanyl patch. 11 Q. Any other forms other than fentanyl 12 patch? 13 A. I think you can get a fentanyl drip 14 also. We -- I think you can get that. There's 15 other opioid-type medicines that can be used 16 intravenously at a hospital type -- you know, 17 put in through the IV or whatever. 18 Q. With respect to the fentanyl patch, 19 is that anything that you've seen produced 20 illegally, or is that always a prescription? 21 A. I've never seen a fentanyl patch 22 produced illegal -- I've never seen a 23 counterfeit Fentanyl patch. 24 Q. How about a fentanyl drip; have you 25 ever seen that produced illegally?</p>

<p style="text-align: right;">Page 222</p> <p>1 A. No.</p> <p>2 Q. Have you ever seen fentanyl in nasal</p> <p>3 spray form?</p> <p>4 A. No.</p> <p>5 Q. You mentioned a few times today that</p> <p>6 most -- many, if not most, of the overdoses</p> <p>7 that you see involve fentanyl.</p> <p>8 Would you agree with that?</p> <p>9 A. Yes.</p> <p>10 Q. Do you know whether the fentanyl is</p> <p>11 from a legal or an illegal source?</p> <p>12 A. I believe it's more -- everything</p> <p>13 that I've seen, for the most part, is from an</p> <p>14 illegal source. Now, we have seen some</p> <p>15 fentanyl patches that were procured in another</p> <p>16 way, but that's extremely rare.</p> <p>17 Q. When you say "fentanyl patches</p> <p>18 procured in another way," do you mean illegal?</p> <p>19 A. They've stolen them somehow. They</p> <p>20 didn't belong to the person that was using</p> <p>21 them.</p> <p>22 Q. We talked earlier today about a</p> <p>23 priority target list. And I don't want to talk</p> <p>24 about that particular list that was clawed back</p> <p>25 today.</p>	<p style="text-align: right;">Page 224</p> <p>1 A. Limited.</p> <p>2 Q. What sort of limited publicity have</p> <p>3 you seen about the lawsuit?</p> <p>4 A. Just that the City of Cleveland is</p> <p>5 part of a lawsuit against the pharmaceutical</p> <p>6 companies.</p> <p>7 I don't watch normal TV. I don't --</p> <p>8 I -- there's a TV in my office that doesn't</p> <p>9 work. Okay? I don't watch it. So the only</p> <p>10 thing I see are little news blurbs that might</p> <p>11 come up in a headline on my news feed, you</p> <p>12 know, on my phone or tablet. But I really -- I</p> <p>13 don't pay attention to those things.</p> <p>14 I don't -- I try not to burden my</p> <p>15 brain, as limited as it is, with things I have</p> <p>16 no control over.</p> <p>17 Q. Okay.</p> <p>18 A. And this is something I have very</p> <p>19 little control over, if any.</p> <p>20 Q. Would you say they mostly come from</p> <p>21 news articles or news blurbs?</p> <p>22 A. Yes.</p> <p>23 Q. Okay. Any radio ads or</p> <p>24 announcements that you've heard about the</p> <p>25 lawsuit?</p>
<p style="text-align: right;">Page 223</p> <p>1 But you remember the discussion that</p> <p>2 we had about that priority target e-mail and</p> <p>3 the list?</p> <p>4 A. Yes.</p> <p>5 Q. You mentioned an investigation</p> <p>6 involving a priority target where that target</p> <p>7 received Percocet pills.</p> <p>8 Do you remember that?</p> <p>9 A. Yes.</p> <p>10 Q. Did that priority target receive</p> <p>11 those -- or obtain those Percocet pills from a</p> <p>12 manufacturer directly?</p> <p>13 A. I'm not sure where they get them</p> <p>14 from.</p> <p>15 Q. When did you first learn of this</p> <p>16 lawsuit?</p> <p>17 A. Sometime after I was transferred</p> <p>18 over from the gang unit to the narcotics unit.</p> <p>19 Q. Did you learn that you'd be deposed</p> <p>20 in this lawsuit after you learned about the</p> <p>21 lawsuit itself?</p> <p>22 A. I learned I was going to be deposed</p> <p>23 a couple of weeks ago.</p> <p>24 Q. Have you ever seen any publicity</p> <p>25 about the lawsuit?</p>	<p style="text-align: right;">Page 225</p> <p>1 A. I don't recall any. I could have</p> <p>2 heard something on my AM radio. But it would</p> <p>3 just be a quick blurb. And like I said, I have</p> <p>4 very limited knowledge to what the particulars</p> <p>5 are with the lawsuit. I mean I'm kind of</p> <p>6 gathering things as I sit here, but I -- very</p> <p>7 limited.</p> <p>8 Q. Do you know of any other individuals</p> <p>9 in your department who have been deposed in</p> <p>10 this case?</p> <p>11 A. I believe Commander Connelly. I</p> <p>12 think he has. I think Commander Gingell has or</p> <p>13 is going to be. And Detective Moran either was</p> <p>14 or is going to be.</p> <p>15 Q. Have you talked to any of those</p> <p>16 individuals about the substance of their</p> <p>17 depositions?</p> <p>18 A. No.</p> <p>19 Q. Have you talked about -- have you</p> <p>20 talked with any of those individuals about the</p> <p>21 substance of your deposition or what you</p> <p>22 anticipate --</p> <p>23 A. No.</p> <p>24 Q. -- being questioned about?</p> <p>25 A. No. Other than I'm not looking</p>



<p style="text-align: right;">Page 226</p> <p>1 forward to it. And that's about it. Just -- I</p> <p>2 was told not to say anything to anybody because</p> <p>3 it's a problem. So we don't -- I don't talk</p> <p>4 about it with anyone.</p> <p>5 Q. Have you worked with any</p> <p>6 pharmaceutical manufacturers in any of your</p> <p>7 investigations?</p> <p>8 A. I could have swear it was Johnson &amp;</p> <p>9 Johnson. But it wasn't for pharmaceuticals.</p> <p>10 It was for baby formula. And they were pretty</p> <p>11 good to work with. That's all I can tell you.</p> <p>12 Q. Before today did you have any</p> <p>13 information about whether any of the defendants</p> <p>14 in this case manufacture opioids?</p> <p>15 A. I'm sorry. Can you say it again.</p> <p>16 Q. Before today did you know whether</p> <p>17 any of the defendants manufacture opioids?</p> <p>18 A. I just saw the list for the first</p> <p>19 time today. And I know Purdue -- I believe</p> <p>20 Purdue manufactures pharmaceuticals. And the</p> <p>21 other ones I -- most of them on the list I</p> <p>22 didn't even recognize.</p> <p>23 Q. Okay.</p> <p>24 A. And some of them are obviously</p> <p>25 well-known stores, you know, Wal-Mart, CVS, so</p>	<p style="text-align: right;">Page 228</p> <p>1 Q. Have you heard of Allergan?</p> <p>2 A. No.</p> <p>3 Q. Have you heard of Watson</p> <p>4 Laboratories?</p> <p>5 A. I have. I've heard the name before.</p> <p>6 I don't know what they make.</p> <p>7 Q. You're not sure whether they</p> <p>8 manufacture opioids?</p> <p>9 A. No.</p> <p>10 Q. Yo have no information that they do?</p> <p>11 A. No.</p> <p>12 Q. Have you heard of Actavis?</p> <p>13 A. No.</p> <p>14 Q. Have you heard of Insys?</p> <p>15 A. What's the name of it?</p> <p>16 Q. Insys.</p> <p>17 A. No.</p> <p>18 Q. Have you heard of Mallinckrodt?</p> <p>19 A. No.</p> <p>20 Q. And finally Spec Gx?</p> <p>21 A. No.</p> <p>22 Q. Have you ever seen any advertising</p> <p>23 for opioids?</p> <p>24 A. Not that I recall.</p> <p>25 Q. Have you ever reviewed any</p>
<p style="text-align: right;">Page 227</p> <p>1 forth.</p> <p>2 Q. Okay. I just want to go through a</p> <p>3 couple of the manufacturers in particular.</p> <p>4 Have you ever heard of Teva?</p> <p>5 A. T-E-V-A?</p> <p>6 Q. Yes.</p> <p>7 A. Not in the regard for that. I know</p> <p>8 it's a shoe company. I'm sure it's not a shoes</p> <p>9 company in this lawsuit though.</p> <p>10 Q. Have you ever heard of Cephalon?</p> <p>11 A. No. Not that I recall. If I've</p> <p>12 heard it, I don't remember what it's for.</p> <p>13 Q. And you said you've heard of Purdue;</p> <p>14 isn't that correct?</p> <p>15 A. Yes.</p> <p>16 Q. And you don't know what opioids they</p> <p>17 manufacture, if any?</p> <p>18 A. Not specifically, no.</p> <p>19 Q. How about Endo Pharmaceuticals; have</p> <p>20 you heard of that company?</p> <p>21 A. No.</p> <p>22 Q. What about Par Pharmaceuticals?</p> <p>23 A. No.</p> <p>24 Q. Noramco?</p> <p>25 A. No.</p>	<p style="text-align: right;">Page 229</p> <p>1 prescribing information for prescription</p> <p>2 opioids?</p> <p>3 A. In what regard are you speaking of?</p> <p>4 Q. Have you seen any labels for</p> <p>5 prescription opioids?</p> <p>6 A. Yes.</p> <p>7 Q. What labels have you seen?</p> <p>8 A. Obviously I've seen labels at crime</p> <p>9 scenes. I've seen -- labels also were --</p> <p>10 everybody has seen labels if they've had</p> <p>11 surgeries or whatever else. Everyone -- I mean</p> <p>12 anyone that's had a surgery that's gotten an</p> <p>13 opioid would see that.</p> <p>14 Q. When you say you've seen labels at</p> <p>15 crime scenes, were those labels for</p> <p>16 prescription opioids?</p> <p>17 A. Some of them, yes.</p> <p>18 Q. In what context -- or -- strike</p> <p>19 that.</p> <p>20 What prescription opioids' labels</p> <p>21 have you sen at crime screens?</p> <p>22 A. Percocets, Vicodin, OxyContin.</p> <p>23 More -- more common Percocet is probably the</p> <p>24 most popular one we've seen.</p> <p>25 Q. Were any of those crime scenes</p>

<p style="text-align: right;">Page 230</p> <p>1 overdose scenes?</p> <p>2 A. Yes.</p> <p>3 Q. When -- can you give me a time frame</p> <p>4 for when those -- when you saw those crime</p> <p>5 scenes?</p> <p>6 A. It would have been in the last --</p> <p>7 MS. DEBROSSE: Object to form.</p> <p>8 THE WITNESS: It would have been in</p> <p>9 the last 14, 15 months.</p> <p>10 BY MS. BARBER:</p> <p>11 Q. Are you familiar with the FDA</p> <p>12 approval process for pharmaceutical products?</p> <p>13 A. No.</p> <p>14 Q. Are you aware that the FDA approves</p> <p>15 package inserts for pharmaceuticals?</p> <p>16 A. I don't know what the FDA does. I</p> <p>17 mean I know they're the Federal Drug</p> <p>18 Administration. I don't know what they do. I</p> <p>19 don't know what they approve. I don't know the</p> <p>20 process of it either.</p> <p>21 Q. When did you first learn that</p> <p>22 opioids are addictive?</p> <p>23 A. Years ago when I first came on the</p> <p>24 job, you know, with -- with -- you know -- to</p> <p>25 me any drug can be addicted -- or addictive.</p>	<p style="text-align: right;">Page 232</p> <p>1 state to write prescriptions; isn't that</p> <p>2 correct?</p> <p>3 A. I believe so, yes.</p> <p>4 Q. You looked at a number of charts and</p> <p>5 statistics today.</p> <p>6 Are you aware of any charts that</p> <p>7 distinguish between illicit opioids and</p> <p>8 prescription opioids?</p> <p>9 A. I'm sure that there's charts out</p> <p>10 there that distinguish between them. You</p> <p>11 mean -- we have them. We've gone over lists</p> <p>12 today that talked about heroin, fentanyl, so</p> <p>13 forth.</p> <p>14 And I'm sure that there's some</p> <p>15 prescription drugs that they're also listed,</p> <p>16 but -- you know, I'm sure there's a list out</p> <p>17 there somewhere.</p> <p>18 Q. Are you aware of the opioid</p> <p>19 epidemic -- of what you believe is an opioid</p> <p>20 epidemic occurring anywhere else in Ohio?</p> <p>21 A. I think it's all over the State of</p> <p>22 Ohio.</p> <p>23 Q. Are you familiar with any particular</p> <p>24 area?</p> <p>25 A. I believe I saw a program about</p>
<p style="text-align: right;">Page 231</p> <p>1 Anything -- or virtually anything.</p> <p>2 There's a few -- you know, anything</p> <p>3 that you're taking like that that gets rid of</p> <p>4 pain, there's a possibility that you could be</p> <p>5 addicted to it. That's my experience, and</p> <p>6 that's what I've seen.</p> <p>7 BY MS. BARBER:</p> <p>8 Q. Have you ever heard of a black box</p> <p>9 warning with respect to an FDA package insert?</p> <p>10 MS. DEBROSSE: Object to form.</p> <p>11 THE WITNESS: No.</p> <p>12 BY MS. BARBER:</p> <p>13 Q. To legally obtain a prescription</p> <p>14 opioid in the United States, a person has to</p> <p>15 have a prescription for that; isn't that</p> <p>16 correct?</p> <p>17 A. Yes. As far as I know in the U.S.</p> <p>18 Q. And it's your understanding that,</p> <p>19 for a pharmacy to dispense a prescription</p> <p>20 opioid, the pharmacy has to receive a</p> <p>21 prescription for the opioid; isn't that</p> <p>22 correct?</p> <p>23 A. Yes.</p> <p>24 Q. And a prescription for opioids has</p> <p>25 to be written by someone who is licensed by the</p>	<p style="text-align: right;">Page 233</p> <p>1 Marietta, Ohio, being a problem.</p> <p>2 Q. When was that?</p> <p>3 A. A couple of years ago. It was</p> <p>4 connected with some girls missing or something</p> <p>5 along those lines.</p> <p>6 Q. Any other areas where you're</p> <p>7 familiar with an opioid epidemic in Ohio?</p> <p>8 A. Let me put it this way: We -- I</p> <p>9 know that we have people come from all parts of</p> <p>10 northern -- Northeast Ohio to buy their drugs</p> <p>11 in Cleveland. It's not uncommon to have people</p> <p>12 from Lorain County, Medina County, Trumbull,</p> <p>13 you name it. They show up, and they're buying</p> <p>14 drugs.</p> <p>15 So it's -- it's -- from my limited</p> <p>16 experience, it's certainly part of Northeast</p> <p>17 Ohio. And I've heard it from other parts of</p> <p>18 the state as well.</p> <p>19 Q. Have you personally worked in other</p> <p>20 areas in the State of Ohio in relation to</p> <p>21 prescription opioids?</p> <p>22 A. No.</p> <p>23 Q. Have you attended any Opiate Task</p> <p>24 Force meetings in Cleveland or Cuyahoga County?</p> <p>25 A. I've attend meetings with the DEA.</p>


<p style="text-align: right;">Page 234</p> <p>1 And I've -- I've -- we've -- I've talked  2 earlier about that I've attended meeting with  3 the commander about, you know, various things.  4 But we've gone over them.  5 And like I said, I don't want to go  6 into some of the names I've talked to at the  7 DEA because they're - they involve targets.  8 Q. Have you attended any meetings  9 though with a particular group called the  10 Opiate Task Force?  11 A. Quite frankly, I'm not sure. I --  12 I'm not sure if I'm part of the Opiate -- or  13 the Opioid Task Force or not. I'm not sure  14 what that is.  15 Because I -- I do know that I attend  16 meetings, and there's other people there. And  17 I don't know if they call us that or if there's  18 a different one that I don't know about.  19 So it's hard to answer that because  20 they come up with task force names all the  21 time.  22 Q. Do you know whether the Cleveland  23 Police Department has ever formalized an  24 assessment of contributing factors for the  25 opioid epidemic?</p>	<p style="text-align: right;">Page 236</p> <p>1 opioids. But we did have a couple where they  2 swallowed a cocktail of pills. But I can't say  3 for sure what they were because they kind of  4 just took everything in the medicine cabinet.  5 And so, yeah, the short answer is I  6 can't name one specific one -- name one  7 specific person that took opioid pills and  8 died. Not offhand. Not since I've been here.  9 Q. Have you seen any instances of  10 overdose -- of overdoses or overdose deaths  11 where someone just took too many of their  12 prescription pills -- opioid pills?  13 A. As I said, as I just mentioned, I  14 mean it happens that people take some of their  15 pills like that. But not that I've personally  16 seen other than the one I mentioned.  17 Q. So that was just a one-time...  18 A. That's the only one I've seen just  19 with -- with prescription pills alone, yes.  20 Q. Was that an intentional overdose?  21 A. It appeared to be.  22 Q. Are you aware of any -- in the  23 course of your work, are you aware of any  24 opioid overdoses or deaths caused by a person  25 who takes a medication that was prescribed to</p>
<p style="text-align: right;">Page 235</p> <p>1 MS. DEBROSSE: Object to form.  2 THE WITNESS: I don't know.  3 BY MS. BARBER:  4 Q. Are you aware of any reports from  5 the Cleveland Police Department that lists  6 contributing factors to the opioid epidemic?  7 A. Not that I'm aware of. There may be  8 one, but I don't recall it.  9 Q. Would you agree with me that not all  10 users of prescription opioids become addicted  11 to prescription opioids?  12 A. Yes. Not -- not everyone. I  13 mean...  14 Q. So you would agree that there are  15 people out there who take prescription opioids  16 and don't become addicted?  17 A. Of course. I would agree with that  18 statement.  19 Q. Are you aware of any overdose deaths  20 attributable to the use of prescription opioids  21 as they were prescribed?  22 A. You mean as the main cause or as  23 what started them out?  24 Q. As the cause of the overdose.  25 A. No. No. I take it back. Maybe not</p>	<p style="text-align: right;">Page 237</p> <p>1 someone else?  2 A. Not that I'm aware of that I've been  3 to personally. There may have been others  4 before me.  5 And once again, I mean we're --  6 you're asking if people are taking these  7 specific pills and they died from them, right?  8 Or if they were -- in this case, if  9 they were prescribed for someone else, and this  10 person took them and then overdosed?  11 Q. Yes. Maybe I can set up a  12 hypothetical or set up a situation.  13 Someone is prescribed prescription  14 opioids properly, legally. And they give the  15 prescription opioids to someone else illegally.  16 Have you seen any overdose or  17 overdose deaths resulting from that sort of  18 scenario?  19 A. No. Because what I've seen are  20 people that start off, they've given -- they're  21 given opioids, and then they become addicted to  22 them, and then they usually go -- they graduate  23 to another drug, such as fentanyl or heroin or  24 a combination.  25 And that is how almost all of the</p>

<p style="text-align: right;">Page 238</p> <p>1 deaths that I've seen have occurred.</p> <p>2 Q. Other than when you were undercover,</p> <p>3 can you identify any prescriptions for opioids</p> <p>4 written in Cleveland on the basis -- I'm sorry.</p> <p>5 Strike that.</p> <p>6 Other than when you were undercover,</p> <p>7 do you have any knowledge of improper</p> <p>8 prescriptions for opioids being written in</p> <p>9 Cleveland?</p> <p>10 MS. DEBROSSE: Object to form.</p> <p>11 THE WITNESS: There's been incidents</p> <p>12 that I can't recall right now that have been --</p> <p>13 you know, we hear it happening all the time,</p> <p>14 especially -- but, you know, yes, there are</p> <p>15 incidents. I can't recall the specific names</p> <p>16 though. I mean it's not uncommon, terrible</p> <p>17 uncommon, at least.</p> <p>18 BY MS. BARBER:</p> <p>19 Q. And the reason you went undercover</p> <p>20 to obtain prescription opioids from a doctor is</p> <p>21 because it was happening prior to?</p> <p>22 A. Yes. Yes. It was Detective Prince</p> <p>23 needed a hand with a case. He asked me to go</p> <p>24 undercover, which I did. And I didn't get the</p> <p>25 actual pills. We just got the prescription,</p>	<p style="text-align: right;">Page 240</p> <p>1 the actions of a particular defendant in this</p> <p>2 case?</p> <p>3 A. No, I can't.</p> <p>4 MS. DEBROSSE: Object to form.</p> <p>5 BY MS. BARBER:</p> <p>6 Q. Does the Cleveland Police Department</p> <p>7 operate any programs for treatment for people</p> <p>8 addicted?</p> <p>9 A. Does the city of Cleveland Police</p> <p>10 Department or City of Cleveland?</p> <p>11 Q. The City of Cleveland Police</p> <p>12 Department.</p> <p>13 A. Do we offer any programs for</p> <p>14 treatment?</p> <p>15 Q. For addicted persons.</p> <p>16 A. I know that -- I know that some</p> <p>17 policemen have become addicted to drugs and</p> <p>18 that the city will offer to help them do</p> <p>19 whatever. It's just like drinking.</p> <p>20 I do know that they offer programs</p> <p>21 or they can assist them to programs. And</p> <p>22 that's -- they are -- there are signs up and</p> <p>23 stuff like that. And we get news -- or e-mails</p> <p>24 every now and then.</p> <p>25 It's also employee assistance -- our</p>
<p style="text-align: right;">Page 239</p> <p>1 the piece of paper.</p> <p>2 Q. Remind me when was that?</p> <p>3 A. A few years ago, five years ago.</p> <p>4 Somewhere around there.</p> <p>5 Q. Can you point -- you can't point to</p> <p>6 any conduct by any manufacturer defendant in</p> <p>7 this case?</p> <p>8 MS. DEBROSSE: Object to form.</p> <p>9 BY MS. BARBER:</p> <p>10 Q. Related to any of the claims in this</p> <p>11 case, can you?</p> <p>12 MS. DEBROSSE: Object to form.</p> <p>13 THE WITNESS: I don't know what they</p> <p>14 do -- I don't know what the drugs that they</p> <p>15 produce are. I don't -- I'm not involved like</p> <p>16 that. All I am is I'm at the ground level. I</p> <p>17 see the end result of what happens.</p> <p>18 So no. I don't -- I don't know what</p> <p>19 those companies produce. So I can't say -- I</p> <p>20 can't point my finger and say -- like I said, I</p> <p>21 don't know what drugs they produce. So I can't</p> <p>22 do that.</p> <p>23 BY MS. BARBER:</p> <p>24 Q. And it's also fair to say that you</p> <p>25 can't identify any specific costs attributed to</p>	<p style="text-align: right;">Page 241</p> <p>1 employee assistance unit would handle that. So</p> <p>2 if there's any issues like that for whatever</p> <p>3 reasons: you're stressed out, you have super</p> <p>4 anxiety. Or if you turn out to have some kind</p> <p>5 of drug problem or alcohol problem, that's who</p> <p>6 you're supposed to go to.</p> <p>7 Unless of course they catch you</p> <p>8 doing something. If you don't go to them</p> <p>9 first, then you're fired.</p> <p>10 Q. Do you know who pays for that</p> <p>11 program?</p> <p>12 A. No.</p> <p>13 Q. Are there any programs for treatment</p> <p>14 for addicted persons who aren't employees of</p> <p>15 the police department?</p> <p>16 A. I do know that, when we go to the</p> <p>17 hospitals -- I don't know who pays for it. I</p> <p>18 do know that we offer -- and when I say this,</p> <p>19 we -- everybody gets offered a treatment if</p> <p>20 they want it.</p> <p>21 We say, "Do you want to get help?</p> <p>22 Do you want to stop doing this?"</p> <p>23 Very few of them actually go through</p> <p>24 with it. They might say, "Yeah." And then</p> <p>25 they'll hem and they'll haw. They'll waste our</p>



<p style="text-align: right;">Page 242</p> <p>1 time for three hours or whatever. Then they'll 2 say, "Ah, forget. I'm not going." 3 But we do offer it. And I don't 4 know -- like I said, once again, I don't know 5 who pays for it. But I know that there's three 6 or four places that we can take them to. And 7 it's one of our goals, you know, to try to get 8 them -- it's like our main goal is to get them 9 treatment along with finding out who sold them 10 the drugs that hurt them. 11 Q. In your experience, has Cleveland 12 experienced epidemics related to the abuse of 13 any other substance besides opioids? 14 A. Yes. When I first came on, crack 15 cocaine was very -- was pretty damaging. 16 Q. Any others? 17 A. Limited meth. There was also a 18 while where K2 was pretty bad, was messing 19 people up, which was being sold primarily at 20 gas stations and, you know, convenience-type 21 stores. Was pretty bad. We did some cases 22 with that. 23 Then, you know, like I said, some 24 things, they'll go in spurts, and they just die 25 out. And others, they'll spurt, spurt, and</p>	<p style="text-align: right;">Page 244</p> <p>1 A. Meth epidemic was more confined. 2 And the meth problem was more to do -- it was 3 dangerous. It's a dangerous drug to produce. 4 It's explosions and everything else. 5 You'd cook meth in the house, and 6 the chemicals that are emitted during the 7 cooking process, it can kill people. Or if a 8 child moves into the house later, the child can 9 have severe problems down the road. And so, 10 for -- from a health perspective, that was like 11 the big problem there. 12 Now, meth in Cleveland isn't like 13 meth in the western part of the United States. 14 Meth in Cleveland is -- it's -- it's more in 15 the -- in the gay -- in the gay clubs, not in 16 the mainstream, you know. Or not it's sold on 17 the corners like it is anywhere else. 18 It's also -- there are circles of 19 it. So once we broke into the circles for the 20 cooks, really we were able to eliminate almost 21 all of them to the point where they left for 22 the most part. 23 MS. BARBER: That's all the 24 questions I have. 25 MR. ROMAN: So, Sergeant, unless</p>
<p style="text-align: right;">Page 243</p> <p>1 then they'll just explode. Almost -- almost 2 what the -- the opioid epidemic did. 3 Q. How did the police department 4 respond to the cocaine epidemic? 5 MS. DEBROSSE: Objection to form. 6 THE WITNESS: In my experience, it 7 was -- I don't know exactly if they had a plan 8 of action. It was just that we'd go out; we'd 9 arrest. 10 At my level at that time, I was a 11 regular patrol officer. We'd go out and, you 12 know, if we make an arrest, it would get 13 forwarded to the vice unit or the narcotics 14 unit. And they follow up from there. And, you 15 know, it was just constant pressure to make 16 arrests. 17 You know, or you go to every 18 community meeting. The number one complaint 19 are drug dealers, you know, causing problems. 20 And then there's also -- like amount of money 21 that was involved was also causing shootings 22 and homicides. 23 BY MS. BARBER: 24 Q. Was the result the same for the meth 25 epidemic that you just discussed as well?</p>	<p style="text-align: right;">Page 245</p> <p>1 your counsel has questions, you are done for 2 today. 3 We have got 27,000-plus documents to 4 read. I hope we don't have to come back here. 5 But unfortunately, we need to reserve that 6 right. 7 THE WITNESS: Okay. No. I get it. 8 Sorry again for the documents. I had nothing 9 to do with that. 10 MR. ROMAN: No. We don't blame you 11 at all, sir. 12 MR. McLAUGHLIN: I just wanted to 13 say the pharmacy defendants join in that 14 reservation of rights. 15 MS. BARBER: And the manufacturer 16 defendants do as well. 17 MS. DEBROSSE: All right. We're 18 done. 19 (Whereupon, the proceeding was 20 concluded at 3:33 p.m.) 21 22 23 24 25</p>



<p style="text-align: right;">Page 246</p> <p style="text-align: center;">C E R T I F I C A T E</p> <p>I, Bonnie L. Russo, Certified Shorthand Reporter, and Notary Public, hereby certify:</p> <p>That MATTHEW BAEPPLER was duly sworn by me, an authorized Notary Public, and that this deposition is a true and correct record of the testimony given by such witness to the best of my knowledge and ability.</p> <p>I further certify that I am not related to any of the parties to this action and that I am in no way interested in the outcome of this matter.</p> <p>In witness whereof, I have hereunto set my hand this day, January 20, 2019.</p> <p>  Bonnie L. Russo  Certified Shorthand Reporter</p>	<p style="text-align: right;">Page 248</p> <p style="text-align: center;">DEPOSITION REVIEW CERTIFICATION OF WITNESS</p> <p>ASSIGNMENT REFERENCE NO: 3191692  CASE NAME: In Re: National Prescription Opiate Litigation  DATE OF DEPOSITION: 1/17/2019  WITNESS' NAME: Matthew Baeppler</p> <p>In accordance with the Rules of Civil Procedure, I have read the entire transcript of my testimony or it has been read to me</p> <p>I have made no changes to the testimony as transcribed by the court reporter</p> <p>Date <u>Matthew Baeppler</u>  Sworn to and subscribed before me, a Notary Public in and for the State and County, the referenced witness did personally appear and acknowledge that:</p> <p>They have read the transcript;  They signed the foregoing Sworn Statement; and  Their execution of this Statement is of their free act and deed</p> <p>I have affixed my name and official seal  this _____ day of _____, 20____</p> <p>_____  Notary Public</p> <p>_____  Commission Expiration Date</p>
<p style="text-align: right;">Page 247</p> <p>Veritext Legal Solutions  1100 Superior Ave  Suite 1820  Cleveland, Ohio 44114  Phone: 216-523-1313</p> <p>January 22, 2019</p> <p>To: Diandra Debrosse Zimmerman, Esq</p> <p>Case Name: In Re: National Prescription Opiate Litigation</p> <p>Veritext Reference Number: 3191692</p> <p>Witness: Matthew Baeppler      Deposition Date: 1/17/2019</p> <p>Dear Sir/Madam:</p> <p>Enclosed please find a deposition transcript. Please have the witness review the transcript and note any changes or corrections on the included errata sheet, indicating the page, line number, change, and the reason for the change. Have the witness' signature notarized and forward the completed page(s) back to us at the Production address shown above, or email to production-midwest@veritext.com</p> <p>If the errata is not returned within thirty days of your receipt of this letter, the reading and signing will be deemed waived</p> <p>Sincerely,  Production Department</p> <p>NO NOTARY REQUIRED IN CA</p>	<p style="text-align: right;">Page 249</p> <p style="text-align: center;">DEPOSITION REVIEW CERTIFICATION OF WITNESS</p> <p>ASSIGNMENT REFERENCE NO: 3191692  CASE NAME: In Re: National Prescription Opiate Litigation  DATE OF DEPOSITION: 1/17/2019  WITNESS' NAME: Matthew Baeppler</p> <p>In accordance with the Rules of Civil Procedure, I have read the entire transcript of my testimony or it has been read to me</p> <p>I have listed my changes on the attached Errata Sheet, listing page and line numbers as well as the reason(s) for the change(s)</p> <p>I request that these changes be entered as part of the record of my testimony</p> <p>I have executed the Errata Sheet, as well as this Certificate, and request and authorize that both be appended to the transcript of my testimony and be incorporated therein</p> <p>Date <u>Matthew Baeppler</u>  Sworn to and subscribed before me, a Notary Public in and for the State and County, the referenced witness did personally appear and acknowledge that:</p> <p>They have read the transcript;  They have listed all of their corrections in the appended Errata Sheet;  They signed the foregoing Sworn Statement; and  Their execution of this Statement is of their free act and deed</p> <p>I have affixed my name and official seal  this _____ day of _____, 20____</p> <p>_____  Notary Public</p> <p>_____  Commission Expiration Date</p>

<p style="text-align: right;">Page 250</p> <p>1           ERRATA SHEET 2           VERITEXT LEGAL SOLUTIONS MIDWEST 3           ASSIGNMENT NO: 1/17/2019 4 PAGE/LINE(S) /       CHANGE       /REASON 5 _____ 6 _____ 7 _____ 8 _____ 9 _____ 10 _____ 11 _____ 12 _____ 13 _____ 14 _____ 15 _____ 16 _____ 17 _____ 18 _____ 19 _____  20 Date           Matthew Baeppler 21 SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ 22 DAY OF _____, 20_____. 23 _____ 24           Notary Public  25           _____               Commission Expiration Date</p>	

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Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF SEPTEMBER 1, 2016. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.



VERITEXT LEGAL SOLUTIONS  
COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

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